

## Lesson no. 19 Garlic



Garlic is an ancient cultivated plant which originates from the Central Asian Steppes. It was a valuable ancient Indian medicine. It is present in every home & used in dishes to increase taste; but it has lot of health benefits & nice to use it in all cooked dishes; there can ways to use in as a medicine 1) pickles 2) chutni 3) paste use in cooking 4) medicines 5) tablets 6) raw but its odour is a trouble etc; to use natural is best because it has lot of properties in natural form; it is of many types according to different region, climate, soil etc. Its botanical name is Allium sativum & family is Liliaceae; it is mentioned in Quran & Hadith. For detail Islamic study on garlic visit my website [www.tib-e-nabi-for-you.com](http://www.tib-e-nabi-for-you.com) or read my English book Tibb e Nabawi part 2 page 64 onwards; direct link to lesson garlic <http://www.tib-e-nabi-for-you.com/garlic.html>

- **NAMES OF GARLIC:** -

1. It is called as Fum in Quran.
2. In Hadees it is called as Saum (ثوم)
3. In Arabic it is called as Thum. (Fum)
4. In Hindi, Urdu & Sanskrit it is called as Lasun.
5. Botanical name is Allium sativum.
6. Family is Liliaceae or Amaryllidaceae

- **QURANIC REFERENCES OF IT:**

1. *Chapter No. 2 (Surah) Baqarah verse no. 61:-*

وَإِذْ قُلْتُمْ يَمْوُسِي لَنْ تَصِرَّ عَلَى طَعَامٍ وَاحِدٍ فَادْعُ لَنَا مِمَّا تُنْبِتُ الْأَرْضُ مِنْ بَقْلَهَا وَقِثَّاهَا وَفُؤْمَهَا وَعَدَسَهَا وَبَصَلَهَا

And (remember) when you said, "O Musa (Moses)! We cannot endure one kind of food. So invoke your Lord for us to bring forth for us of what the earth grows, its herbs, its cucumbers, its Fum (wheat or garlic), its lentils and its onions." He said, "Would you exchange that which is better for that which is lower? Go you down to any town and you shall find what you want!" And they were covered with humiliation and misery, and they drew on themselves the Wrath of Allah ﷺ. That was because they used to disbelieve the Ayat (proofs, evidences, verses, lessons, signs, revelations, etc.) of Allah ﷺ and killed the Prophets wrongfully. That was because they disobeyed and used to transgress the bounds (in their disobedience to Allah ﷺ, i.e. commit crimes and sins).

In following books Hadith it is mentioned: -

1. Bukhari : 853, 854, 5421, 5451, 5452, 7359,
2. Tirmizi : 1806, 1807, 1808, 1809,
3. Muslim : 561 B, 562 A & B, 564 B,
4. Abu Dawud : 3823, 3827,
5. Ibn Majah : 3488, 3489, 3490,

There are lots of more Hadith related to garlic;

- **CONCLUSION OF HADEES:** -

1. Do not come in Masjid or in public after eating raw vegetables with bad odour of garlic coming from your mouth. We can eat them cooked in food & bad smell should not come from mouth. Nabi ﷺ did not liked bad smell, specially from mouth because Angle use to come to Him bringing Messages & Quranic verses from Allah & Angles get irritated by te bad smell even people get irritated.

- **Garlic plant:** -



Garlic is a perennial plant which grows from a bulb. The elongated main bulb of the plant is situated at the base of the plant and sits on top of a hard, flat ring the underside of which is covered in roots. Around the main bulb are the closely-packed, curved bulblets or cloves. Each clove is enclosed by a white, membranous skin; it is ideal to grow it in a warm, moderate climate. The plant flowers from July to August. It is an asexually propagated crop; garlic is not propagated sexually; Garlic plants grow about 60 cm (2 feet) tall. Depending on the variety, the long leaves typically arise from a short hard stem above the bulb or emerge from a softer pseudostem made up of overlapping leaf sheaths. It is usually grown as an annual crop and is propagated by planting cloves or top bulblets, though seeds can be also be used. The garlic plant can either have a short, woody central stem (hard-neck) or a softer pseudostem made up of overlapping leaf sheaths (soft-neck). Hard-neck varieties produce a false flower stock which is termed a 'scape' and produce larger garlic cloves but in smaller numbers. Soft-neck garlic is the most popular variety of garlic grown; the stem is very short and flattened and gives way to a pseudostem, the garlic plant can possess 6–12 flat, blade-like leaves which can stretch up to 50 cm (19.7 in) long. The plant can reach 60 cm (23.6 in) in height and is an annual, surviving only one growing season.

Garlic is a hardy perennial which can be grown in a variety of soil types. The plants perform best when planted in a light, well draining, organic loam with a pH between 6.0 and 7.0. The plant grows well in cool weather but will tolerate a range from 9–28°C (48.2–82.4°F). Garlic should be planted in an area that receives full sun for most of the day. Garlic requires a period of cold followed by a period of light and heat in order to develop properly. The plants will perform best when they have 6-8 weeks below 4.4°C (40°F).

- **Garlic bulb:** -



Garlic bulb consists of several cloves, which is the reproductive organ of garlic with high nutritional and medicinal values; the clove contains a bud, a thick storage leaf and a protective leaf; it is also known for its medicinal and neutraceutical properties, with a large spectrum of antibacterial and anti-inflammatory activity; the bulb is covered with membranous skin and encloses up to 20 edible bulblets called cloves. The bulb can be up to 7 cm (2.8 in) in diameter and is made up of 1–15 cloves. There are many

different kinds of garlic and they're almost all different in size, colour, shape, taste, number of cloves per bulb, pungency and storability.

- **Flower:** -



The spherical flower cluster is initially enclosed in a pair of papery tapered bracts; the bracts split open when the green-white or pinkish flowers bloom. Flower stalks sometimes arise bearing tiny bulbils (tiny secondary bulbs that form in place of flowers) and sterile blossoms.

- **Botanical classification:** -

- Garlic (*Allium sativum*) has 2 subspecies, hardneck (*ophioscorodon*) and softneck (*sativum*).
- Hardneck types have flower stalks or scapes, bigger cloves, are easier to peel, more cold-tolerant.
- Softneck (no scapes, easier to braid, stores later, smaller cloves, harder to peel).



Hard-neck



soft-neck

Botanists classify all true garlics under the species *Allium sativum*. There are two subspecies: 1) *Allium sativum* var. *ophioscorodon*, the hard-necked varieties. 2) *Allium sativum* var. *sativum*, the soft-necked varieties.

- **Types of garlic:** -

Five very different hard-neck varieties called: 1) Porcelain 2) Purple Stripe 3) Marbled Purple Stripe 4) Glazed Purple Stripe 5) Rocambole.

Three varieties of weakly bolting hard-necks that often produce soft-necks: 1) Creole 2) Asiatic 3) Turban  
Two distinct soft-neck varietal groups: 1) Artichoke 2) Silver-skin

- **Garlic root:**-

Garlic roots grow from all sides of the garlic bulb's flat plate of the underground stem. The roots are white, hairless and quite strong. A mature garlic plant has around 40-60 roots. A mature garlic plant has around 40-60 roots; the garlic plant roots are not efficient for a nutrient intake



Porcelain garlic



purple strip garlic



marble strip garlic



glazed purple garlic



rocambole garlic



creole garlic



asiatic garlic



turban garlic



artichoke garlic



silver skin garlic



root system of garlic

- **Scape:** -



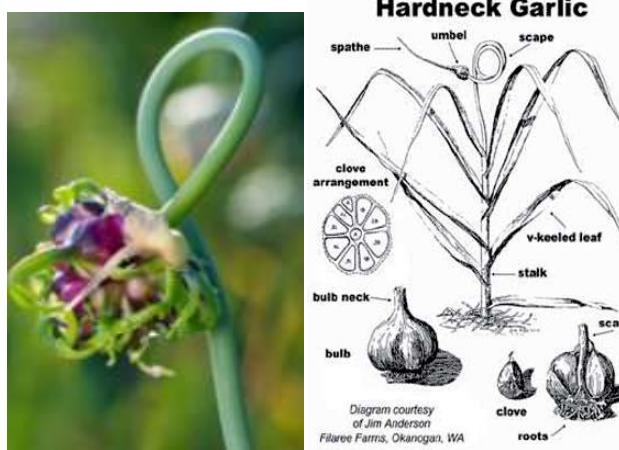
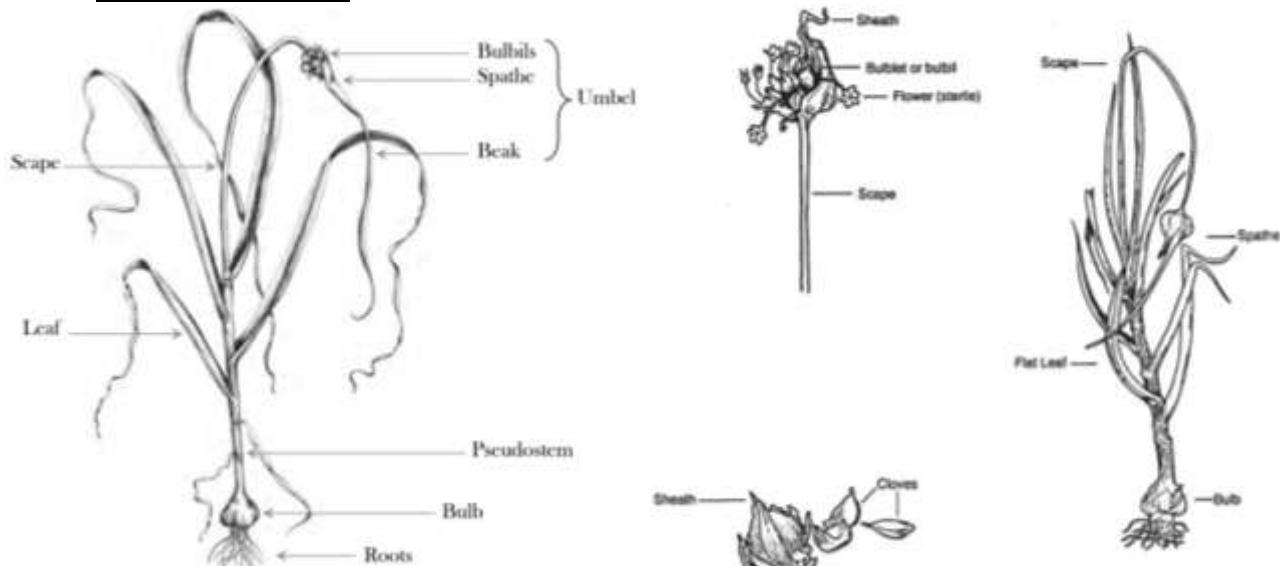
Scape is an extension of the underground stem and the flat base of the garlic bulb and becomes the flower stalk in the further stages of the growth of the garlic plant. Scape is produced by hard-necks only, however it might happen that a soft-neck produces one too, which is rather rare. Scape is shot up by the garlic plant and initially grows erect (sometimes bents or coils during the growth).

- **Bulbils:** -



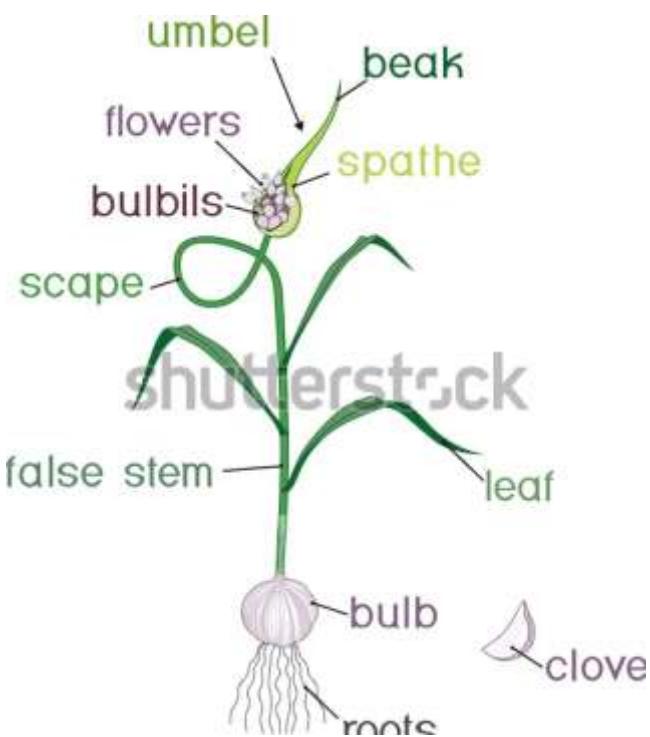
Bulbils are asexual propagules, a small seed produced by the bolting cultivations of garlic, mostly hard-necks. It may be that soft-neck cultivation partially bolt and release a scape crowned by the spathe filled with tiny bulbils and flowers. Bulbils compete for the garlic plant energies with the tiny flowers within the spathe. Bulbils differ in shape, colour and size depending on the garlic cultivation. They are edible; however they are mostly used as the seeds for the new garlic plant.

- **Spathes of garlic:** -



Spathe is a special leaf, which before maturing and splitting, ends with a long, spiky beak. The spathe encases the umbel filled with the bulbils and inflorescence and when fully matured it splits to reveal the content. Afterwards it dries out but remains connected to the base.

- **Umbel capsule:** -



Umbel capsule is a part of the spathe containing inflorescence & bulbils. It is an informal term referring to the cluster encased by the spathe.

- **Gargle clove:** -



Each small, individual segment of a garlic bulb is a clove; the number of cloves in a bulb depends on the size and variety of the garlic; one garlic bulb may contain 10 to 12 cloves.

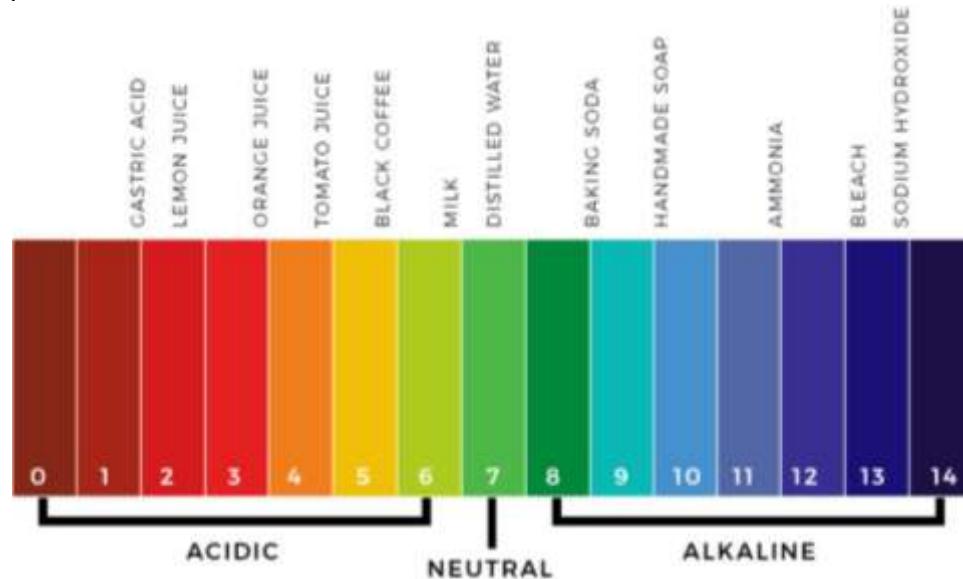
**pH of garlic is:** - 5.8; it is acidic because its pH is below 7.

pH is a measure of hydrogen ion concentration, a measure of the acidity or alkalinity of a solution. The pH scale usually ranges from 0 to 14. Aqueous solutions at 25°C with a pH less than 7 are acidic, while those with a pH greater than 7 are basic or alkaline & 7 is neutral; only aqueous solutions have pH levels, vegetable oil has no pH value. Likewise, other oils such as animal and petrochemical oils also have no pH value. Fatty acids are organic molecules often found in foods, including vegetable oils.

The pH of pure water is 7. In general, water with a pH lower than 7 is considered acidic, and with a pH greater than 7 is considered alkaline. The normal range for pH in surface water systems is 6.5 to

8.5, and the pH range for groundwater systems is between 6 and 8.5. We can add normal water to reduce the acidity.

It is Sunnat of Prophet Muhammed (s.a.w) to mix acidic with Alkaline to make it neutral or less acidic that why He used to eat dates with watermelon or cucumber or dry dates with little butter; so you can mix one acidic with alkaline; also it is Sunnat to drink honey mixed in water; also dates or raisins soaked in water over night & drink the syrup (sharbat). Remember do not soak dates & raisin together at one time; soak at separate time & drink.



- **Calories of garlic:** - 1 clove gives 4 calories only.
- **Glycemic index & Glycemic load:** - Garlic doesn't have a GI ranking since it doesn't have carbohydrates and won't increase blood sugar levels.
- **Gross health benefits of garlic:** -

It helps in controlling blood pressure, heart diseases, reduces cholesterol, increases digestion, it is antibacterial, anti viral, anti fungal, antioxidant, increases immune power, best for ear, throat, lungs diseases, detox the body, improves menstrual cycle, improves bone health, increases taste & appetite, reduces cough, phlegm, good for hair, reduces lice, dandruff (its oil or paste), heals wounds, for skin, acne, patchy hair fall, anticancer, anti-inflammatory etc.

- **Clinical pharmacology of garlic:** -

Allicin and other sulfur compounds are the major compounds for the antimicrobial effect of garlic. Garlic is effective against a number of gram-negative, gram-positive and acid-fast bacteria, including *Staphylococcus*, *Salmonella*, *vibrio*, *mycobacteria*, and *Proteus* species.

The gram positive *Staphylococcus aureus* was more susceptible to the effects of garlic than gram negative; also specific bacteria such as *Escherichia coli* and *salmonella typhi*; Allicin in its pure form was found to exhibit antibacterial activity against multidrug-resistant enterotoxigenic strains of *E. coli*; Allitridi, a proprietary garlic derivative, has been successfully used to treat systemic bacterial infections (such as *Helicobacter pylori*); Gram-negative diarrheagenic pathogens (*E. coli*, *Shigella* sp, *Salmonella* sp, and *Pro. mirabilis*) from stool samples were highly sensitive to garlic; The significant antibacterial activity of garlic extract on streptomycin-resistant strains (Gram-positive *Staph. aureus* and Gram-negative *E. coli*) solely and in synergism with streptomycin has also been proved.

In a study by Lai and Roy, fresh extracts of *A. sativum* (garlic) and *Nigella sativum* (black cumin) had more antibacterial activity against the isolates of the urinary tract infection, compared to the individual extract or drugs, such as cefalexin, cotrimoxazole, and nalidixic acid; has antibacterial activity against the pig pathogen *Actinobacillus pleuropneumoniae* serotype 9. The main compound that is suggested to be

responsible for this effect of garlic is volatile allyl methyl sulfide (AMS) as a lead compound of volatile garlic metabolites.

Allicin (diallyl-dithiosulfinate), which is produced by the garlic enzyme alliinase from the alliin, has been shown to have wide-range antifungal specificity *Candida albicans*; Studies on the effect of Amphotericin B (AmB) against *C. albicans* showed that allicin enhances significantly the effect of AmB against *Candida albicans*, *Saccharomyces cerevisiae* and against *Aspergillus fumigatus*; study indicated that Allicin has anti-parasitic activity against *Plasmodium falciparum* and *Trypanosoma brucei* etc; there are many benefits of it mentioned in separate content explained below.

- **Modern uses of it:** -

**1. For general health & cold season:-**

Take 1 clove of garlic, 7 seeds of black seed (black caraway) (kalonji), soak both overnight in 1 spoon of extra virgin olive oil, add 1 teaspoon of honey & smash & crush the garlic & black seed mix all well & lick it after licking drink 1 cup of normal water; you can do this one or twice week lifelong.

**2. For cough & cold, lungs infection, typhoid etc: -**

Take 1 clove of garlic, 1 dried fig & 7 seeds of black seed, 1 teaspoon of extra virgin olive oil crush & all make a paste & lick drink 1 cup normal water on it; repeat 3 times a day for 7 days followed by twice for 7 days followed once for 7 days.

**3. For sinus, throat infection etc: -**

Take 1 teaspoon Qust powder, 1 teaspoon extra olive oil, 1 clove garlic, 1 teaspoon honey crush & mix all, take pan leaves (leave which are chew as pan) keep the paste in the middle of pan leave & keep it in one corner of mouth followed by chewing slowly; twice a day for 7 days.

**4. For ear infection & pain or ear wax: -**

Take one clove of garlic & 1 spoon of olive oil or any oil mix both & heat on low flame, fill the ear fully with this mild warm oil; right ear & lay for one or two hour with left lateral position followed by opposite ear, do it once a day for 7 days or till relief.

**5. For presentation from heart disease & full health: -**

Try to put garlic clove in all cooked food.

- **Contents/constituents of garlic:** -

All contents may not present in all types of it, because there are many varieties of it according to geographical regions & content may differ a lot as per cultivation, soil, seed, climate etc.

Garlic contains at least 33 sulfur compounds, several enzymes, 17 amino acids, and minerals.

Alkaloid, Saponins, Flavonoids, Anthraquinones, tannins, steroids, phenols, cardiac glycoside, Sulphur compound allicin (diallyl-dithiosulfinate) (DDS) , S-allylcysteine (SAC) and diallyl trisulfide (DTS), seleno, thiosulfinate, allyl sulfide, dietary Fiber, potassium, sodium, calcium, copper, iron, magnesium, manganese, phosphorus, selenium, zinc, carotene, cryptoxanthin, lutein-xanthin, vitamin B1, B2, B3, B5, B6, B9, Vitamin A, C, E, K.

The above ingredients are based on scientific study, means these has been indentified, known & learnt by modern science, it does not means that it contains only these ingredients, there may be many more ingredients which are yet to be discovered, learnt & known by modern science.

- **Active ingredient of garlic:** -

Sulphur compound allicin (diallyl-dithiosulfinate) (DDS) , S-allylcysteine (SAC) and diallyl trisulfide (DTS),

**Basic details of each constituent & contents of garlic separately:** -

A good quality of garlic contains little amount of amino acids mentioned in table below: -

The above ingredients are based on scientific study, means these has been indentified, known & learnt by modern science, it does not means that it contains only these ingredients, there may be many more ingredients which are yet to be discovered, learnt & known by modern science.

The details given below are based on natural ingredients found in garlic and not synthetically prepared

Raw garlic	Amino acids
Weight 3 grams 1 clove	In milligrams & % RDI
Tryptophan(mg) (% RDI)	2 (1%)
Threonine(mg) (% RDI)	5 (0%)
Isoleucine(mg) (% RDI)	7 (0%)
Leucine(mg) (% RDI)	9 (0%)
Lysine(mg) (% RDI)	8 (0%)
Methionine(mg) (% RDI)	2 (0%)
Cystine(mg) (% RDI)	2 (1%)
Phenylalanine(mg) (% RDI)	5 (1%)
Tyrosine(mg) (% RDI)	2 (0%)
Valine(mg) (% RDI)	9 (0%)
Histidine(mg) (% RDI)	3 (0%)
Arginine(mg)	19
Alanine(mg)	4
Aspartic acid(mg)	15
Glutamic acid(mg)	24
Glycine(mg)	6
Proline(mg)	3
Serine(mg)	6

- **Allixin:** -

Allixin is a compound produced when garlic is crushed or chopped. Available in dietary supplement form, it's been found to reduce inflammation and offer antioxidant benefits. Fresh garlic contains an amino acid called alliin. When the clove is crushed or chopped, an enzyme, alliinase, is released. Alliin and alliinase interact to form allicin, which is considered the major biologically active component of garlic. Allicin was discovered in 1944 by Cavallito and Bailey and then Cavallito et al. first noted its potent antimicrobial activity. Allicin is not present in raw garlic, but it is rapidly produced by the action of CS-lyase (allinase) on alliin. Allinase is activated by crushing or cutting the garlic cloves. Allicin represents about 70% of the overall thiosulfinate present in the cloves upon mechanical crushing. Mechanistic and pharmacokinetic studies of allicin and its derivatives raise the need for a labeled compound. Labeling of this volatile and unstable liquid requires delicate handling.

The allicin generated is unstable and quickly changes into a series of other sulfur-containing compounds such as diallyl disulfide. Allicin is part of a defense mechanism against attacks by pests on the garlic plant. Allicin is garlic's defence mechanism against attacks by pests. When the garlic plant is attacked or injured it produces allicin by an enzymatic reaction. The enzyme alliinase converts the chemical alliin to allicin, which is toxic to insects and microorganisms.

Allicin is an oily, slightly yellow liquid that gives garlic its unique odor. It is a thioester of sulfenic acid and is also known as allyl thiosulfinate. Its biological activity can be attributed to both its antioxidant activity and its reaction with thiol-containing proteins. Produced in garlic cells, allicin is released upon disruption, producing a potent characteristic scent when garlic is cut or cooked. Allicin has been studied for its potential to treat various kinds of multiple drug resistance bacterial infections, as well as viral and fungal infections, anti-inflammatory, antioxidant, cardio-protective etc.

- **Anthraquinone:** -

Anthraquinone, also called anthracenedione or dioxoanthracene, is an aromatic organic compound; It is a yellow, highly crystalline solid, poorly soluble in water but soluble in hot organic solvents. Anthraquinones are active components of many plant blends which are used as medicines and exhibit laxative, diuretic, estrogenic, and immunomodulatory, anti viral, anti bacterial, laxative effects.

- **Cardiac glycoside:** -

Cardiac glycosides are a class of organic compounds that increase the output force of the heart and increase its rate of contractions by acting on the cellular sodium-potassium ATPase pump. Their beneficial medical uses are as treatments for congestive heart failure and cardiac arrhythmias.

- **Sulfur:** -

Sulfur is an essential element for all life, but almost always in the form of organo-sulfur compounds or metal sulfides. Three amino acids (cysteine, cystine, and methionine) and two vitamins (biotin and thiamine) are organo-sulfur compounds. Many cofactors also contain sulfur, including glutathione, thioredoxin, and iron–sulfur proteins. Disulfides, S–S bonds, confer mechanical strength and insolubility of the protein keratin, found in outer skin, hair, and feathers. Sulfur is one of the core chemical elements needed for biochemical functioning and is an elemental macronutrient for all living organisms. Sulfur (in British English, sulphur) is a chemical element with the symbol S and atomic number 16. Elemental sulfur is a bright yellow; Sulfur is the third most abundant chemical in the human body. The element is also found in a number of foods such as garlic, onions, eggs, and protein-rich foods. Sulfur is necessary for the synthesis of the essential amino acids cysteine and methionine. It is helpful in osteoarthritis, muscles soreness, hair fall, antibacterial, antiviral, dandruff etc.

- **Seleno:** -

Garlic (*Allium sativum*) and onion (*Allium cepa*) are widely known for their biological properties but are far from having revealed all of their secrets even if the compounds involved in the biological mechanisms, flavenols, sulphur and seleno compounds have been identified. The beneficial effects of garlic & onion on health, includes protection against cardiovascular diseases and cancers.

- **Thiosulfinate:** -

Thiosulfinates are also named as alkanethiosulfinic (or arenethiosulfinic) acid esters. They are the first member of a family of compounds containing an oxidized disulfide bond; Thiosulfinates are the best studied compounds arising from Allium species and most of our knowledge of their structure and biogenesis is due to Block; Thiosulfinates are very unstable compounds and give rise to further rearrangements leading to a wide variety of derived sulfur compounds.

- **Allyl sulfide:** -

If the onion is ingested, these compounds are eventually broken down into allyl methyl sulfide, shown below, which can be removed from the body by exhalation – giving rise to the characteristic 'onion breath'; It is organo-sulfur in garlic & onion & related to odour of both & exhale with its odour. it promotes health & is under research.

- **Dietary fibre:** -

It is an eatable part of vegetables & fruit; our body cannot digest it just passes the small intestines & colon & excrete in stools; it is of two types 1) soluble fibre 2) insoluble fibre.

Soluble fibre dissolve in water & form a gel like material & helps in controlling blood cholesterol & blood glucose; it is found in apple, carrot, barley, oats, peas, beans watermelon etc.

Insoluble fibre do not dissolve & promotes excretion & increase bulk of the stool thus relief constipation & helps in elimination of toxins also. It is found in wheat flour, beans, cauliflower, potato, green beans, watermelon, beetroot, beet leaves etc.

This is the reason it is helpful in constipation conditions, it can eaten in pregnancy to relief constipation and get other benefits of it also.

### **Basic pharmacokinetics of dietary fibre (based on human intake in natural food products): -**

Soluble fibres get dissolve in water & become a gelatinous substance; do not get digested; it helps to slow the digestion & help the body to absorb vital nutrient from eaten food.

Insoluble fibres do not dissolve in water but remain in fibrous form, and do not get digested; it helps the food pass through the digestive system and increase the bulk of stool & eliminate toxins also.

### **Basic clinical pharmacology of dietary fibre: -**

It helps in slow down the digestive process thus gives a good control in blood glucose, improves insulin sensitivity, reduces risk of diabetes, maintains weight, helpful in obesity, reduces blood pressure, reduces cholesterol, reduces inflammation, reduces risk of heart disease, relieves constipation thus helpful in piles, fistula & other rectal disorders & disease, improves bowel movement thus improves bowel health, slowdowns the digestion thus improves quality of digestion, reduces risk of many types of cancer.

- **Vitamin B1 (Thiamin): -**

It is called as Thiamin also; it is a water soluble vitamin, it belongs to B-complex family, it is an essential micro nutrient which cannot be made by our body.

### **Main sources of vitamin B1: -**

It is present in watermelon, spinach, legumes, banana, quince, wheat germ, liver, egg, meat, dairy products, nuts, peas, fruits, vegetables, cereals, rice, breads, oats etc.

### **Basic pharmacokinetic of vitamin B1 (based on human intake in natural food products): -**

Intestinal phosphatases hydrolyze thiamin to make it free & absorbed in duodenum, jejunum mainly through active transport in nutritional doses & passive diffusion in pharmacological doses, very little is known about its absorption; it is metabolized in liver; it is excreted in urine & stored little in liver, heart, kidney, brain, muscles.

### **Clinical pharmacology of vitamin B1: -**

It is needed for metabolism of glucose, amino acids (proteins), lipids (fats) etc; every cell of the body require it to form ATP (adenosine triphosphate) as a fuel for energy, also it enables the body to use carbohydrates as sources of energy; also nerve cells, heart cells, muscles cell require it to function normally; its deficiency causes beri-beri heart disease, weight loss, confusion, malaise, optic neuropathy, irritability, memory loss, delirium, muscles weakness, loss of appetite, tingling sensation in arms & legs, blurry vision, nausea, vomiting, reduce reflexes, shortness of breath etc; it is helpful to immune system; excessive intake of carbohydrates, protein, glucose (speacially in body builders, athletes etc) increases the need of vitamin B1.

- **Vitamin B2: -**

It is also called as Riboflavin, it is a water soluble vitamin, it is an essential micro nutrient, it helps many systems of the body; it is not synthesized in human body.

### **Main sources of vitamin B2: -**

It is present in watermelon, liver, milk, dairy products, nuts, egg, fish, leafy vegetables, almonds, mushroom, lean meat and quince.

### **Basic pharmacokinetic of vitamin B2 (based on human intake in natural food products): -**

It is phosphorylated in the intestinal mucosa during absorption; mainly absorbed in upper gastrointestinal tract; the body absorbs little from a single dose beyond of 27mg; when excessive amount is eaten it is not absorbed; very little is known about its absorption. The conversion of it into its coenzymes takes place mainly in cells of small intestines, heart, liver, kidneys & throughout the body in many cells; it is excreted in urine & stored little in liver, heart, kidneys & in tissues of the body.

### **Basic clinical pharmacology of vitamin B2: -**

It is needed by the body to keep skin, eyes, nerves, red blood cells healthy, it also helps adrenal gland, nerve cells, heart, brain to function; it also act in metabolism of food, amino acids (protein), fats, helps to convert carbohydrate into energy (Adenosine triphosphate formation- the energy body runs on). It plays an important role in functioning of mitochondria.

Its deficiency is called as Ariboflavinosis & causes weakness, throat swelling, soreness of mouth & tongue, cracks on skin, dermatitis, anemia, weak vision, itching & irritation in eyes, migraine.

- **Vitamin B3: -**

It is called as Niacin or Nicotinic acid; it is in 2 forms niacin & nicotinamide acid; it is water soluble vitamin; it is an essential micro nutrient; it plays a role in over 200 enzymatic reactions in the body; It is produced in the body in small amount from tryptophan which is found in protein containing food & sufficient amount of magnesium, vitamin B6 & B2 (are needed to produce it).

#### **Main sources of vitamin B3: -**

It is present in watermelon, green peas, peanuts, mushroom, avocados, meat, egg, fish, milk, cereal, green vegetables, liver, chicken, coffee, potato, corn, pumpkin, tomato, almonds, spinach, enriched bread, carrots, quince etc.

#### **Basic pharmacokinetic of vitamin B3 (based on human intake in natural food products): -**

If eaten in natural form it is absorbed in stomach & small intestines by the process of sodium-dependent carrier-mediated diffusion in 5 to 20 minutes; if taken in therapeutic doses get absorbed by passive diffusion in small intestines. Its uptake in brain requires energy, in kidneys & red blood cells requires a carrier. It is metabolized in liver in 2 ways either is conjugated with glycine or niacin is form into nicotinamide; it is stored little in liver unbound to enzymes. It is excreted in urine.

#### **Basic clinical pharmacology of vitamin B3: -**

It regulates lipid level in the body; it acts on carbohydrate to form energy sources for the body, it ease arthritis, boost brain function, every part of body needs it to function properly, it helps convert food into energy by aiding enzymes & cellular metabolism, it acts as an antioxidant. It prevents heart disease. Deficiency of it causes pellagra, high blood cholesterol, memory loss, fatigue, depression, diarrhea, headache, skin problems, lesion in mouth, tiredness etc.

- **Vitamin B5 (pantothenic acid): -**

It is also called as pantothenic acid, it is water soluble vitamin, it is a micro nutrient, it is necessary for making blood cells; acts to convert eaten proteins, carbohydrate, fats into energy; it is a component of coenzyme A; it is used in synthesis of coenzyme A. (coenzyme A acts on transport of carbon atoms within the cell).

#### **Main sources of vitamin B5: -**

It is present in watermelon, quince, meat, chicken, liver, kidney, fish, grains, milk, dairy products, legumes etc.

#### **Basic pharmacokinetic of vitamin B5 (based on human intake in natural food products): -**

It is converted into free form by intestinal enzymes & in nutritional doses it is absorbed in intestinal cells via sodium dependent active transport system in jejunum & pharmacological doses are absorbed by passive diffusion; after absorption the free form of it is now transported to erythrocytes via plasma, in cells pantothenic acid is converted into CoA, all the body tissues can convert it into CoA & ACP (acyl carrier protein), after these two complete their jobs they are degraded to form free pantothenic acid & other metabolites. It is excreted in urine & stools & little in exhaled in carbon dioxide.

#### **Basic clinical pharmacology of vitamin B5: -**

It promotes skin, hair & eyes health, proper functioning of nervous system & liver, formation of red blood cells, making of adrenal hormones, sex hormones; it is very helpful in constipation, rheumatoid arthritis, acne, allergies, asthma, baldness, colitis etc.

Its deficiency causes fatigue, nausea, vomiting, irritability, neurological weakness, numbness, abdominal cramps, sleep disturbances, hypoglycemia etc.

- **Vitamin B6: -**

It is also called as pyridoxine; it is involved in many aspects of macronutrients metabolism; it is present in many food products naturally.

#### **Main sources of vitamin B6: -**

It is present in watermelon, quince, chicken, bread, egg, vegetable, soyabean, whole grain cereals, brown rice, fish, legumes, beef, nuts, beans, liver, citrus fruits, starchy vegetables, potato etc.

#### **Basic pharmacokinetic of vitamin B6 (based on human intake in natural food products): -**

It is absorbed in small intestines, but before absorption a phosphate group has to be removed making vitamin B 6 in free form & absorbed by passive transport, now reaches liver via portal vein, in liver to get metabolized & flown into the blood stream it is bound with albumin & some are taken up by red blood cells, once getting in blood it

can function & promote health & it is excreted mainly in urine & little is excreted in stools, it is very little stored in tissues, muscle tissues, liver, brain, kidneys, spleen.

### **Basic clinical pharmacology of vitamin B6: -**

It is needed for proper development & function of brain in children; it is needed for neurotransmitter, histamine, haemoglobin synthesis & function. It serves as coenzyme (cofactor) for many reactions in the body, it is the master vitamin for processing amino acids & some hormones, it is needed by the body to prepare serotonin, melatonin & dopamine, it is better to intake it during treatment of tuberculosis. It supports adrenal glands to function; it acts as a coenzyme in the breakdown & utilization of fats, carbohydrates, protein, it is important for immune system, it helps in treatment of nerve compression like carpal tunnel syndrome, premenstrual syndrome, depression, arthritis, high homocysteine level, diabetes, asthma, kidney stones etc.

Its deficiency causes seborrheic dermatitis (eruption on skin), atrophic glossitis with ulceration, conjunctivitis, neuropathy, anaemia etc.

- **Folate (vitamin B9): -**

Folate is an essential micro nutrient, it is a natural form of vitamin B9, it serves many important functions of the body, it plays an important role in cell growth & formation of DNA, RNA & other genetic material & helps in treating many diseases; its name is derived from Latin word *Folium*, which means leaf, leafy vegetables have it in good amount; Folic acid is a synthetic form of vitamin B9.

### **Main sources of folate: -**

It is present in watermelon, quince, dark green leafy vegetables, fruits, nuts, beans, dates, seafood, egg, dairy products, meat, chicken, legumes, beetroot, citrus fruits, broccoli, spinach, cereals etc.

### **Basic pharmacokinetic of folate (based on human intake in natural food products): -**

Its absorption is complicated because folate present in food are of many different forms, some of which cannot be absorbed until broken down by intestinal enzymes; it is not absorbed more than 50%; dietary folate contains glutamate that need to separate it from glutamate before absorption starts; It is absorbed in duodenum & jejunum, after absorption it is converted into tetrahydrofolate (the active form of folate), then a methyl group is added to it to form methyltetrahydrofolate; now the body uses it for various functions & metabolism; the body can store folate 20-70mg in liver which is enough for 3 -6 months for the body; it gets excreted in urine & little in stools & bile.

### **Basic clinical pharmacology of folate: -**

It is needed by the body to make DNA, RNA & other genetic material; it prevents many disease & conditions like anaemia, stroke, cardiac diseases, cancers, neurological diseases, macular degeneration (eye disease), palpitation, sores in mouth & tongue, hair fall, graying of hair. It is important in fertilization in male & female, essential during pregnancy to prevent neural tube defect in embryo (it is needed more), it protect us from free radicals & oxidation thus prevent cancers, it is essential in red blood cells formation, reduces high levels of homocysteine.

Its deficiency may cause anaemia, tiredness, palpitation, breathlessness, hairfall, neural tube defect in baby during pregnancy etc.

- **Vitamin A: -**

It is a fat soluble vitamin; it is group of unsaturated organic compound that includes retinol, retinal, retinoic acid & several provitamin A carotenoid. There are 2 types of vitamin A, 1) Vitamin A: - found in meat, poultry, fish & dairy products; 2) Provitamin A: - found in fruits, vegetables, plants; beta carotene is common type of provitamin A; it is an antioxidant, reduces wrinkles & repairs the skin damages; it is available in the market as tretinoin in tablets & creams to heal acne.

### **Main sources of vitamin A: -**

It is present in watermelon, fish oil, carrot, green leafy vegetables, citrus fruit, sweet potato, spinach, kale, quince etc.

### **Basic pharmacokinetic of vitamin A (based on human intake in natural food products): -**

It is absorbed in jejunum mainly, little through skin; metabolism is in liver & excreted in urine & stools, it is conjugated with glucuronic acid & then changed into retinal & retinoic acid; retinoic acid is excreted in stool, mainly. It is stored primarily as palmitate in Kupffer's cells of liver, normal adult liver stores sufficient amount of it which is enough for 2 years for the body, little is stored in kidneys, lungs, adrenal glands, fats, retina; it is excreted in urine & stools.

### **Clinical pharmacology of vitamin A: -**

it is needed by the body for vision and maintains eye health specially retina; it prevents night blindness; it helps in normal reproduction of cells thus prevents cancer; it is required for proper growth & development of embryo throughout the pregnancy period, it is good for skin, supports immune function; helps the heart, kidneys & lungs to work properly.

- **Vitamin C: -**

It is also called as Ascorbic acid; it is an essential water soluble vitamin, very much needed by the body for many functions & absorption etc.

### **Main sources of vitamin C: -**

It is present in watermelon, citrus fruit, broccoli, cauliflower, sprouts, capsicums, papaya, strawberries, spinach, green & red chillies, cabbage, leafy vegetables, tomato, cereals, quince, cucumber etc.

### **Basic pharmacokinetic of vitamin C (based on human intake in natural food products): -**

It does not need to undergo digestion, 80 to 90% of it eaten is absorbed by intestine cell border by active transport & passive diffusion & through ion channels it enters the plasma via capillaries. It is very little stored in adrenal glands, pituitary gland, brain, eyes, ovaries, testes, liver, spleen, heart, kidneys, lungs, pancreas & muscles. All together body can store 5 grams of it & we need 200mg/day in order to maintain its normal level & uses, but old, disease person, smokers & alcoholic need more daily value. It is excreted in urine in the form of dehydroascorbic acid changed by liver & kidneys both, but unused vitamin C is excreted intact.

### **Basic clinical pharmacology of vitamin C: -**

It prevent cough & cold, repairs tissue, acts as an enzyme for certain neurotransmitter, important for immune function, it is a powerful antioxidant (donates electron to various enzymatic & non-enzymatic reactions); body prepares collagen with the help of vitamin c; it is also helpful in Alzheimer's, dementia, acts on iron absorption, it protects the body from oxidative damages, reduces stiffness of arteries, reduces tendency of platelets to clump each other, improves nitric oxide activity (dilatation of blood vessels) thus prevents high blood pressure & heart disease, also prevent eye disease, reduces risk of cataract, prevents the lining of lungs & prevents lung disease, it is a natural antihistamine (anti allergy), eliminates toxins from the body. Deficiency of it causes Scurvy disease (brown spots on skin occurs, swelling of gums, bleeding from all mucous membrane, spots are more on thighs & legs, the person looks pale, feel depressed, cannot move, loss of teeth, suppurative wounds occur).

- **Vitamin K: -**

It is a fat soluble vitamin; it is essential for normal blood clotting; it occurs naturally in two forms, vitamin K1 (phylloquinone) which is widely distributed in plants; it is present in olive oil; Leafy vegetables are good sources of K1; vitamin K2 (menaquinones) is synthesized in alimentary tract by bacteria (*Escherichia coli* & other bacteria).

### **Main sources of vitamin K1: -**

It is present in olive oil & also present in green leafy vegetables (spinach, kale etc) cauliflower, cabbage, broccoli, sprout, fish, liver, meat, egg, cereals etc.

### **Basic pharmacokinetics of vitamin k (based on human intake in natural food products): -**

It is absorbed in small intestine, bile is required for it absorption & stored in fatty tissues & liver; it is excreted 40% to 50% in stools & 30% to 40% in urine.

### **Basic clinical pharmacology of vitamin K: -**

It acts on synthesis of certain proteins that are prerequisites (necessary) of blood coagulation (means act on stop bleeding) & body also needs it to control the binding of calcium in bones & other tissues. Deficiency of it makes bones weaker, calcification of arteries & other tissues thus take care of bones, joints & heart; it reduces tumour growth & is helpful in cancers.

- **Vitamin E: -**

It is fat soluble vitamin; it is a group of eight fat soluble compounds that includes four tocopherols & four tocotrienols.

### **Main sources of vitamin E: -**

It is present in olive oil, almonds, cereals, wheat germ, sunflower oil, corn oil, soybean oil, peanuts, green leafy vegetables & etc.

### **Basic pharmacokinetics of vitamin E (based on human intake in natural food products): -**

It is absorbed in small intestines & metabolized in liver & distributed through lymphatic system & stored in fat droplets of adipose tissue cells; it is mainly excreted in stool, little in urine & through skin.

### **Basic clinical pharmacology of vitamin E: -**

It prevents coronary heart disease, supports immune system, prevent inflammation, promotes eye health, lowers the risk of cancer; It is a powerful anti-oxidant thus reduces UV damage of skin, nourishes & protects the skin when applied on face; also promotes hair growth.

- **Potassium: -**

It is a mineral with symbol K & atomic number 19, it is an essential mineral which body cannot prepare; it is necessary for heart, kidney & other organs to function, its low level in body is called as hypokalemia & high level is called as hyperkalemia; it is mostly present inside the cells (intracellular); normal blood range is 3.5 to 5.0 milli equivalents per/liter (mEq/L).

### **Main sources of potassium: -**

Potassium is naturally present in banana, orange, dates, raisin, broccoli, milk, chicken, sweet potato, pumpkin, spinach, watermelon, coconut water, white & black beans, potato, dried apricot, beetroot, pomegranate, almond, quince etc.

### **Basic pharmacokinetics of potassium (bases on human intake in natural food products): -**

It is absorbed in small intestines by passive diffusion; it is stored mostly inside the cell, little in liver, bones & red blood cells. 80 to 90% potassium is excreted in urine & 5 to 20% is excreted in stools, sweat.

### **Basic clinical pharmacology of potassium: -**

It is a mineral belongs to electrolytes of the body; it conducts electrical impulses throughout the body & assists blood pressure, normal water balance, muscle contraction, nerves impulse, digestion, heart rhythm, maintain pH balance. It is not produced in our body so we need to consume it through eating; Kidneys maintain normal level of it in the body by excreting excessive amount of it in urine or reabsorb it if the amount is less in the body so that the body may reuse it. Its deficiency may cause weakness, low blood pressure, constipation, nausea, vomiting etc. Its normal amount in body keeps blood pressure normal; water balance in body normal; prevents heart disease, stroke, osteoporosis, kidney stone etc.

- **Sodium: -**

Here we are learning natural sodium, its symbol is Na & atomic no. 11; it is not produced in the body we need to take it in food sources; it is an important & essential mineral on which our body functions; it regulates blood pressure, blood volume etc.

### **Main sources of sodium: -**

Excessive intake of sodium should be avoided; It has very less amount of sodium; vegetables & fruits have less sodium in them which is good for the body. It is present in beans, meat, fish, chicken, chilli, bread, rolls, milk, celery, beetroot etc.

### **Basic pharmacokinetic of sodium (based on human intake in natural food products): -**

It is absorbed in ileum by active sodium transport because it is impermeable & in jejunum absorption takes place via mediated active transport & depends on levels of water, bicarbonate, glucose, amino acids etc; its absorption plays an important role in the absorption of chloride, amino acids, glucose & water; similar mechanism are involved in the reabsorption of it in kidneys when its level in the body falls. It is excreted mainly in urine, little in sweat & stools. It is stores in bones & dissolved in various body fluids.

### **Basic clinical pharmacology of sodium: -**

It is amongst the essential electrolyte within the body, it remains in extracellular fluid (outside the cell) mainly, it carries electrical charges within the body, kidney maintain its normal level in the body, normal level is 135-145 milli-equivalent per liter (mEq/L), it is not produce in the body, it acts on muscles contraction, nerve cells, regulates blood pressure, blood volume; it takes part in every function of the body mostly, its low level in body is called as hyponatremia, it is found more in older aged, kidney disease, heart disease, hospitalized patient, this condition may cause brain edema, low blood pressure, fatigue, tiredness etc; its high level in the body is called as hypernatremia may cause increase in blood pressure, thirst, confusion, muscle twitching or spasm, seizures, weakness, nausea, loss of appetite, swelling in body etc.

- **Lutein & zeaxanthin: -**

Both are important carotenoid found in nature, they are related with beta carotene & vitamin A, they gives plants, fruits & vegetables yellow or red colour, they are absorbed best in human when taken with high-fat meal because it needs bile for digestion. Both are colour pigment found in human eye (macula & retina) they get deposited in macula & retina thus prevents many diseases of eyes.

#### **Main sources of both: -**

They are present in carrot, broccoli, kale, spinach, grapes, pumpkin, yellow vegetable, egg yolk, green leafy vegetable, orange, kiwi, corn etc.

#### **Basic pharmacokinetics of both (based on human intake in natural food products): -**

They are absorbed with the help of bile by mucosa of small intestine via passive diffusion & send to the liver via lymphatic system & in liver it is incorporated into low density & high density lipo proteins & transported to target tissues (retina etc) by specific lutein binding protein mediates the selective uptake of it. The absorption depends on the amount & sources of intake; it is 70 % absorbed; it is excreted in bile & urine & stored in liver & adipose tissues of the body.

#### **Basic clinical pharmacology of both: -**

They are powerful anti oxidant, anti diabetic, anti cancer. They prevent age-related macular degeneration, cataract, retinitis pigmentosa, retinopathy, macular degeneration, they work as light filter & protect the eye tissues from sunlight damages, they block blue light from reaching the underlying structure in the retina of eyes thus reduces the risk of light induce oxidative damage that could lead to age-related macular degeneration (AMD).

They also prevent free radicals thus prevents colon cancer, cervical cancer, lungs cancer, breast cancer, prostate cancer, vision loss, improves mental function, respiratory infections, reduce high blood pressure, reduce soreness of muscles after exercise, reduce eye strain, controls diabetes, prevent heart diseases etc.

- **Cryptoxanthin: -**

It is a carotenoid; it is converted into vitamin A in human body & it is considered as provitamin A.

#### **Main sources of cryptoxanthin: -**

Red pepper, pumpkin, papaya, carrots, oranges, sweet corn, peaches, olive etc.

#### **Basic pharmacokinetics of cryptoxanthin (based on human intake in natural food products):**

To be absorbed it must be free from its food matrix, emulsified into oil droplets, then taken up by the cells of intestine by 2 mechanism one by facilitative transport assisted by enzymes next by epithelia transport also involved in cholesterol & lipid uptake, however in high pharmacological doses it is absorbed by passive diffusion; after absorption it is converted into vitamin A.

#### **Basic clinical pharmacology of cryptoxanthin: -**

It is antioxidant, prevents free radicals damage of DNA & other cells & stimulate repair of oxidative damages to DNA, anticancer, prevents osteoporosis.

- **Calcium: -**

It is natural essential mineral for the body, it is among the electrolytes of the body; its symbol is Ca & atomic no. 20.

#### **Main sources of calcium: -**

It is present in watermelon, quince, milk, banana, cheese, green leafy vegetables, soya beans, nuts, fish, meat, egg, bread, flour, yogurt, almonds, kale, soybean, spinach, cucumber etc.

#### **Basic pharmacokinetics of calcium (based on human intake in natural food products): -**

Calcium is absorbed in duodenum & upper jejunum (when calcium intake is low) by transcellular active transport process, this depends on action of calcitriol & intestinal vitamin D receptors & when calcium intake is high, absorbed by paracellular passive process throughout the length of small intestine by 3 major steps, entry across the brush border, intracellular diffusion via calcium-binding protein & extrusion; Vitamin D is necessary for absorption of calcium, also vitamin C, E, k, magnesium & exercise increases the absorption of calcium. Also the level of calcium is regulated by calcitonin released by thyroid gland it reduces calcium level in blood when it is excessive & increases the excretion of calcium via kidneys; Parathyroid hormones (PTH) released by parathyroid gland increases the blood level of calcium when body need it or calcium is less in blood & promotes reabsorption of it in kidneys (calcitonin & PTH both have opposite function). Intestines can absorb 500 to 600 mg of calcium at

a time; it is mostly stored in bone tissues & teeth & excreted in stool & sweat & little in urine depended upon the level of it in blood. Also estrogen act on transport of blood calcium in bones thus women mostly suffer from osteoporosis after menopause.

### **Basic clinical pharmacology of calcium: -**

Calcium acts on bone health, communication between brain & other parts of the body, muscles contraction, blood clotting; it is a co-factor for many enzymes, it relaxes the smooth muscles & blood vessels; it maintains heart rhythm, muscles function; it is more needed in childhood & deficiency of it in childhood may cause convulsions (seizure); Excessive level of it in blood is called as hypercalcemia & may lead to kidney stone formation, heart attack, stroke, loss of appetite, excessive urination, memory loss etc; its low level in blood is called as hypocalcemia & may lead to cramps in the body, weak bones, weak teeth, numbness, tingling etc.

### **Contraindication: -**

Sarcoidosis, excessive level of calcium in blood, very severe constipation, kidney stones, increased activity of parathyroid gland etc. Hypersensitivity of calcium, severe cardiac diseases, hypercalcemia, hypercalciuria, severe kidney stones etc.

- **Iron: -**

It is an essential mineral for our body; its symbol is Fe & atomic no. 26; it is an important component of haemoglobin (haemoglobin binds oxygen in lungs & supply it to whole body, it is oxygen carrier).

### **Main sources of iron: -**

It is present in watermelon, quince, meat, dates, spinach, egg, nuts, dark leafy green vegetables, broccoli, pumpkin seeds, chicken, legumes, fish, banana, cabbage, kidney, almonds, cucumber etc.

Meat is the best source of iron, it provides Fe+2 directly which can be transported from intestine to blood stream through Fe+2 transporter ferroportin (this binds with transferring & delivered into tissues).

### **Basic pharmacokinetics of iron (based on human intake in natural food products): -**

The absorption of iron is not known fully; about only 10% of iron taken in food is absorbed; it is absorbed in duodenum & upper jejunum mainly & at the end part of ileum; low pH is needed for its absorption, after absorption it gets bind to transferring (each transferring can carry 2 atoms of iron); ceruloplasmin (protein) also helps in binding of iron; Hepcidin a hormone produced by liver is released when iron stores are full & inhibits iron transport & binding, thus reduces the absorption of iron; vitamin C & copper enhances iron absorption.

### **Storage of iron: -**

Iron is stored in liver (in hepatocytes & Kupffer's cells) Kupffer's cells play an important role in recycling body iron, they ingest aged RBC liberate iron for it & reuse by breaking down haemoglobin. Little iron is stored in liver, heart, & kidneys in form of ferritin also little in bone marrow, spleen.

### **Excretion of iron: -**

The body does not possess a physiological mechanism for regularly eliminating iron from the body because most of it is recycled by liver cells; iron is lost within cells, from skin & interior surface of the body (intestines, urine, breathe).

### **Basic clinical pharmacology of iron: -**

It is an important component of Haemoglobin (haemoglobin binds oxygen in lungs & supply it to whole body); iron is beneficial for nails, hair, skin etc; it acts on blood production, its deficiency causes Anaemia (low haemoglobin level in blood) (this causes reduced oxygen carrying capacity & supply of it); most of the iron is present in haemoglobin, it consists of one heme (iron), one protein chain (globin) this allows it to bind & load oxygen from the lungs & supply it to whole body.

Unbound or free iron is highly destructive & dangerous it can trigger free radical activity which can cause cell death & destroy DNA.

- **Copper: -**

It is an essential micronutrient mineral; its symbol is Cu & atomic no. 29; there are lot of health benefits of it; it is needed in little amount in the body.

### **Main sources of copper: -**

It is present in watermelon, quince, spirulina (water-plant), nuts, seeds, lobster, leafy green vegetables, guava, grapes, green olive, kiwi, mango, pineapple, pomegranate, egg etc.

### **Basic pharmacokinetics of copper (based on human intake in natural food products): -**

It is absorbed 30 to 50%; it is absorbed easily than other minerals, its absorption depends on the copper present in the body, when the intake of it is less, absorption is increased & when intake is more absorption is less, it is mainly absorbed in small intestines & little in stomach via carrier-mediated process; its absorption is influenced by amino acids, vitamin C & other dietary factors. After absorption it is bound primarily to albumin, peptide & amino acids & transported to liver. Copper is secreted into plasma as a complex with ceruloplasmin. It is mainly stored in liver little in brain, heart & kidneys; it is excreted mainly in bile & little in urine.

### **Basic clinical pharmacology of copper: -**

Together with iron it enables the body to form RBC; it helps to maintain health of bones, blood vessels, nerves & immune system; it also acts on iron absorption, protein metabolism, growth of body, it acts also on development of brain, heart & other organ; it is needed by the body for making ATP, collagen. Excessive of it may cause Wilson's disease.

### **Deficiency of copper: -**

It is very rare; but may cause cardiovascular disease, genetic defects, inflammation of optic nerve etc.

- **Selenium: -**

It is an essential trace mineral, it is micro nutrient helpful to our body; its symbol is Se & atomic no. 34.

### **Main sources of selenium: -**

It is present in watermelon, fish, nuts, beef, chicken, mushroom, egg, grains, garlic, grapes etc.

### **Basic pharmacokinetics of selenium (based on human intake in natural food products): -**

It is mainly absorbed in duodenum & proximal jejunum by active transport process; Dietary selenium is in 2 forms organic (selenoimethionine) it is 90% absorbed & inorganic (selenite) it is 50% absorbed; after absorption it is sent in liver via portal veins, liver turns it into selenite & then is bound with selenoproteins & send into blood stream, gets in RBC, muscles, tissues etc; it is not distributed evenly in the body, liver has more of it; Vitamin E & other vitamins increases its absorption & both work as an anti-oxidant. Natural selenium remains in the body for less than 24 hours; it is stored in amino acid in skeletal muscles, little in liver, kidneys & pancreas; it is primarily excreted in urine, stool & expired in air via lungs very little in sweat & semen.

### **Basic clinical pharmacology of selenium: -**

It is important for many body functions, immune system, fertility (both male & female); it contributes in thyroid hormone metabolism, DNA synthesis; it protects the body from oxidative damages & infection, it is found in tissues, skeletal muscles; it helps testes & seminal vesicles in their function; it reduces the risk of miscarriages, liver disease, cancer, asthma, cardio vascular disease; deficiency of it causes pain in muscles & joints, weaken the hair, nails, white spots on nails are found etc.

- **Magnesium: -**

It is an important essential mineral; its symbol is Mg & atomic no. 12; it is a co-factor for more than 300 enzymes that regulates functions in the body. Its normal range in blood is 0.75 to 0.95 millimoles (mmol)/L.

### **Main sources of magnesium: -**

It is present in watermelon, quince, spinach, meat, egg, nuts, dark leafy green vegetables, broccoli, pumpkin seeds, dates, chicken, fish, legumes, cucumber etc.

### **Basic pharmacokinetics of magnesium (based on human intake in natural food products): -**

It is absorbed about 20 to 50% only; it is absorbed about 40% in distal intestine when the level of it is low via passive paracellular transport & about 5% in descending colon when the level of it is high via active transcellular transport. Vitamin D increases its absorption & also acts on its excretion in urine. It is excreted in urine & stool; it is stored in bones.

### **Basic clinical pharmacology of magnesium: -**

It is a co-factor for more than 300 enzymes that regulates functions in the body. It act on protein synthesis, muscles & nerve function, blood glucose, control blood pressure, it is required for energy production, bone development, synthesis of DNA & RNA. It also plays a role in active transport of calcium & potassium ions, muscles contraction, normal heart rhythm etc.

- **Phosphorus: -**

It is an essential mineral; its symbol is P & atomic no. 15, it is needed for many parts & functions of the body.

### **Main sources of phosphorus: -**

It is present in watermelon, quince, meat, nuts, beans, fish, chicken, dairy products, soy, grains, lentils, cucumber etc.

### **Basic pharmacokinetics of phosphorus (based on human intake in natural food products): -**

It is absorbed 70-85%, it is absorbed 30% in duodenum, 20% in jejunum, 35% in ileum; it is absorbed in inorganic phosphate form by 2 separate process first when the phosphorus intake is high mainly after meals by paracellular sodium independent passive diffusion pathway & second is transcellular sodium dependant carrier-mediated pathway this falls under the control of vitamin D & etc. When calcium level is too high in the body phosphorus is less absorbed, optimum calcium : phosphorus ratio is helpful in its absorption (excess of anyone decreases the absorption of both). It is stored in bones 85% & rest in tissues; it is excreted 80% in urine & rest in stools (excretion of it is a regulatory action of parathyroid hormone (PTH), vitamin D, and fibroblast).

### **Basic clinical pharmacology of phosphorus: -**

It is present in nature combined with oxygen as phosphate. It acts on growth of teeth, bones, repairs of cells & tissues. It plays an important role in metabolism of carbohydrate, fats, protein & ATP. It works with B-complex vitamins & helps kidney function, muscles contraction, normal heart beats, nerve impulse etc.

- **Zinc: -**

It is a trace mineral; symbol is Zn & atomic no. 30; it is necessary for human body as it plays vital role in health.

### **Main sources of zinc: -**

It is present in watermelon, quince, meat, fish, legumes, beans, egg, dairy products, seeds, nuts, whole grains, cucumber etc.

### **Basic pharmacokinetics of zinc (based on human intake in natural food products): -**

It is absorbed 20 to 40%, its absorption depends on its concentration & is absorbed in whole intestines (jejunum has high rate of its absorption) via carrier-mediated mechanism, it is released from food as free ions during digestion. Zinc from animal sources is easily absorbed comparing to plants sources. It is present in bile & pancreatic juices which is released in duodenum & is reused by the body this is called as endogenous zinc & zinc present in food sources is called as exogenous zinc. Its absorption depends on 2 proteins- Albumin & metallophinonein. Albumin enables zinc to be transported from plasma into enterocytes. It is stored in muscles, bones mainly & little in prostate, liver, kidneys, skin, brain, lungs, heart & pancreas. It is excreted in stools 80% & rest in urine & sweat. Metallophinonein binds to zinc to make it unavailable & excrete it in stools when zinc is excess in the body, & production of metallophinonein is reduced when zinc is less in the body to make zinc available for the body.

### **Basic clinical pharmacology of zinc: -**

It is necessary for immune system, prevents skin diseases, heal skin diseases, helps stimulate activity of at least 100 different enzymes in the body; it is required in little amount in the body, but children, pregnant & old aged need it more. It promotes growth in children, synthesize DNA & acts on wound healing, it is best in treating initial diarrhea & cold cough. It improves learning, memory, fertility etc. It heals acne, attention deficit hyper activity disorder (ADHD), osteoporosis, pneumonia etc.

- **Manganese: -**

It is an essential mineral & micro nutrient, needed by the body for proper health. Its symbol is Mn & atomic no. 25.

### **Main sources of manganese: -**

It is present in watermelon, nuts, beans, legumes, brown rice, leafy green vegetables, pineapple, beetroot etc.

### **Basic pharmacokinetics of manganese (based on human intake in natural food products): -**

It is absorbed 40%, it is absorbed more in women than men; if intake of it is more, than absorption is less & if intake is less, absorption is more; its absorption takes place in small intestines, after absorption it is bounded to blood protein transferring & transmanganin & transport via blood stream to tissues; it is absorbed by inhalation & dermal (skin) also; it crosses brain blood barrier. It is stored in bones, liver, kidney, pancreas; it is excreted mainly in bile & stools, little in urine & sweating; unused manganese is transported to liver for excretion & excreted via bile mainly.

### **Basic clinical pharmacology of manganese: -**

It is needed for proper health of skin, bones, cartilage etc; it helps in glucose tolerance, regulates blood sugar, reduces inflammation, reduces premenstrual cramps, it also aids in formation of connective tissues, bones, sex hormones, blood clotting, metabolism of carbohydrates & fats; it facilitates calcium absorption.

- **Beta carotene:** -

It is an anti oxidant that converts into vitamin A & plays a very important role in human health; it is responsible for the red, yellow, orange colouration in some fruits & vegetables. It promotes eye health & prevents eye diseases.

**Main sources of beta carotene:** -

It is present in pumpkin, carrot, sweet potato, dark leafy vegetables, apricot, red & yellow pepper, spinach, kale, grapes etc.

**Basic pharmacokinetics of beta carotene (based on human intake in natural food products):**

It is absorbed in intestine by passive diffusion & get converted into provitamin A in the presence of bile acids, the intestinal mucosa plays a key role in converting it into provitamin A. It is transported in blood plasma exclusively by lipoproteins. The complete absorption, metabolism & excretion is not known fully. It is stored in fats & liver.

**Basic clinical pharmacology of beta carotene:** -

It is anti oxidant, reduces risk of lung cancer & promote lung health, reduces free radicals thus prevents cancer & heart disease, diabetes, promotes skin health, improves.

- **Saponin:** -

Saponins are glucosides with foaming characteristics. Saponins consist of a polycyclic aglycones attached to one or more sugar side chains. The aglycone part, which is also called sapogenin, is either steroid (C27) or a triterpene (C30). The foaming ability of saponins is caused by the combination of a hydrophobic (fat-soluble) sapogenin and a hydrophilic (water-soluble) sugar part. Saponins have a bitter taste. Some saponins are toxic and are known as sapotoxin.

**Basic clinical pharmacology of saponin:** -

It reduces cholesterol, LDL, increases testosterone, libido & muscle mass; it maintains balance between cellular proliferation & cell death the disturbances in the balance cause severe diseases like cancer etc; it is anti bacterial, anti oxidant, inhibit tumour growth.

- **Tannin:** -

It is of astringent (dry & puckery feeling in mouth) taste, it is a polyphenol present in many plants, fruits, plant's wood, bark, leaves, skin, seeds etc. It is also called as Tannic acid; it is of 2 types hydrolysable & condensed. Hydrolysable is decomposable in water & reacts with water & form other substance. Condensed form is insoluble & precipitates, it is called as tanner's resins. But most of tannic acid is water soluble.

**Main sources of tannin:** -

It is present in berries, apple, barley, nut, tea, legumes, grapes, pomegranate, quince, oak wood, lemons, squash etc.

**Basic pharmacokinetics of tannin (based on human intake in natural food products):** -

Its absorption, metabolism & excretion are yet not known & are under research. After ingestion its bioavailability is poor due to its large size, high affinity to bind to plasma protein & low lipid solubility. It gets hydrolyzed in glucose & release gallic acid & other compounds upon decomposition.

**Basic clinical pharmacology of tannin:** -

It is used internally & externally. Externally it cures & heals the condition when applied on cold sores, fever blisters, diaper rashes, bleeding gums, tonsillitis, skin rashes, white discharge, yellow discharge, minor burn etc. It is used as douche for vaginal disorders like white or yellow discharge.

In food it is used as flavoring agent & naturally present in fruits etc, it relieves & cures chronic diarrhea, dysentery, hematuria (blood in urine), pain in joints, persistent cold, cancers etc, it reduces high blood pressure, high lipids in blood. It is anti aging, anti oxidant, anti bacterial, anti enzymatic. It is used in medicated ointments for piles.

If used excessively it can give toxic effects on skin & internally may reduce absorption of vitamin, cause stomach irritation, nausea, vomiting, liver damage, kidney damage. It should not be used in pregnancy, breast feeding & constipation.

- **Absorption & digestion of amino acid.**

When we eat high-protein foods, body breaks down protein into amino acids and peptides through digestive enzymes, such as pepsin & pancreas produces trypsin, chymotrypsin and other that aid in protein digestion.

Pepsin is the primary enzyme responsible for digesting protein; it acts on the protein molecules & breaks the bonds – called peptide bonds – that hold the protein molecules together. Next, these smaller chains of amino acids move in the stomach & then in small intestine where they're further broken down by enzymes released by the pancreas. Small intestine contains finger-like extensions called micro-villi. These structures enhance its ability to absorb dietary nutrients. Now the semi digested material pass through brush border and baso-lateral membranes of small intestine & di-tripeptides are absorbed by passive transport (facilitated or simple diffusion) or active transport ( $\text{Na}^+$  or  $\text{H}^+$  co-transporters) pathways. Di and tripeptides are more efficiently absorbed than free amino acids which in turns are better absorbed than oligopeptides. They're released into the bloodstream and used for various biochemical reactions.

Each amino acid has a different role in the human body. Upon absorption, some amino acids are incorporated into a new protein. Some fuel your muscles and support tissue repair. Others are used as a source of energy.

Tryptophan and tyrosine, for example, promote brain health. These amino acids support the production of neurotransmitters, leading to increased alertness and optimum nerve responses. Tryptophan also assists with serotonin production, lifting your mood and keeping depression at bay.

Phenylalanine serves as a precursor to melatonin, epinephrine, dopamine and other chemicals that regulate your mood and bodily functions. Methionine helps your body absorb selenium and zinc, two minerals that promote overall health. Some amino acids, such as isoleucine, play a vital role in hemoglobin production and glucose metabolism.

- **Tryptophan:** -

It is an amino acids (protein) that is useful in bio-synthesis of protein; it is essential in human because body cannot make it); it is a precursor of neuro-transmitter serotonin, melatonin, vitamin B3; it is a sedative also.

**Main sources of tryptophan:** -

Salmon oil, egg, spinach, milk, seeds, fenugreek seed, soy products, nuts, fish, meat, wheat, banana etc.

**Basic pharmacokinetics of tryptophan (based on human intake in natural food products):** -

It is absorbed in small intestine & reached the blood circulation, it passes the blood brain barrier & in brain cells it is metabolized into indolamine neuro-transmitter, niacin, a common example of indolamine is serotonin derivative from tryptophan. Tryptophan is converted into serotonin in the brain & body; it is believed that tryptophan supplements should be taken with carbidopa, which blocks the blood brain barrier. (Serotonin (5HTP) 5 hydroxytryptamine, is a monoamine neuro-transmitter. It contributes in feelings of well-being, happiness, reward, learning, memory, many physiological functions).

In the pathway of tryptophan/serotonin, melatonin hormone is produced. Melatonin regulates sleep-wake cycle. It is primarily released by pineal gland in brain. It controls circadian (daily clock) rhythms.

Pineal gland releases it at night more & very little in day light. It improves immune system function.

Natural sources of melatonin are tomato, pomegranate, olive, grapes, broccoli, cucumber, barley, seeds, nuts etc.

Fructose malabsorption causes improper absorption of tryptophan in intestine thus leading to low level of it & may cause depression.

**Basic clinical pharmacology of tryptophan:** -

It is necessary for normal growth of infants; nitrogen balance in adults, it aids in sleep pattern, mood. It is necessary for melatonin & serotonin formation in body, it enhances mental & emotional well being, manages pain tolerance, weight etc. it also helps in build muscle tissue, essential for vitamin B3

production, relives insomnia, reduces anxiety, depression, migraine, OCD, helps immune system, reduces cardiac spasms, improves sleep patter etc.

- **Threonine:** -

It is an amino acid used in biosynthesis of proteins; it is an essential amino acid important for tooth enamel, collagen, elastin, nervous system, fats metabolism, it prevents fats buildup in liver, useful in intestinal disorders, anxiety, and depression.

**Main sources of threonine:** -

Cheese, chicken, fish, meat, lentil, black seed, nuts, soy etc.

**Basic clinical pharmacology of threonine:** -

It is useful in nervous system disorders, multiple sclerosis, spinal spasticity, makes bones, joints, tendons, ligament stronger, it helps the immune system, promotes heart health.

- **Isoleucine:** -

It is an amino acid that is used in the biosynthesis of proteins, it is an essential amino acid means the body cannot make it & we depend on food sources, it plays & helps many functions of the body.

**Main sources of isoleucine:** -

Meat, mutton, fish, cheese, egg, seeds, nuts, soybeans, milk, legumes, fenugreek seed etc.

**Basic pharmacokinetics of isoleucine (based on human intake in natural food products):** -

It is absorbed in small intestine by sodium-dependant active transport. It is metabolized in liver.

**Basic clinical pharmacology of isoleucine:** -

It promotes glucose consumption & uptake, it is anti-catabolic, enhances athletic performance & best for pre-workout, it acts on wound healing, detox of nitrogenous waste in the body, stimulates immune system, promotes secretion of many hormones, helps in haemoglobin formation, regulating blood glucose, energy in the body, built muscles, helpful to brain for its function.

- **Leucine:** -

It is branched chain amino acid (BCAA) it is ketogenic amino acid; it is necessary when we do exercise, it stimulates protein synthesis & assists in muscle building.

**Main sources of leucine:** -

Cheese, soyabean, meat, nuts, chicken, seeds, fish, seafood, beans.

**Basic clinical pharmacology of leucine:** -

It helps regulate blood glucose, promotes growth, recovers the muscles & bone tissues, acts on production of growth hormones, repairs the tissues, essential for muscle building, it burns fats, controls obesity, promotes lean muscles growth.

- **Lysine:** -

It is an essential amino acid, which our body cannot prepare and we need to eat it from food sources. It is necessary for many body functions, acts in building blocks of protein (muscles).

**Main sources of lysine:** -

Red meat, chicken, egg, fish, beans, lentils, wheat germ, nuts, soybeans, spirulina, fenugreek seed, shrimp, pumpkin seed, tuna, cheese, milk etc.

**Basic pharmacokinetics of lysine (based on human intake in natural food products):** -

It is absorbed from the lumen of the small intestine into the enterocytes by active transport, it undergo first pass metabolism in liver & is metabolized in liver.

**Basic clinical pharmacology of lysine:** -

It helps the body in tissue growth, repair muscles injury, promote collagen formation, help the body to produce enzymes, antibodies, hormones, supports immune system, its deficiency causes fatigue, irritability, nausea, hair loss, anorexia, inhibited growth, anemia, problems with reproductive system, it is very helpful in treating cold sores (herpes), control blood pressure, diabetes, osteoporosis, helps

athletes performance, helpful in treating cancers, reduces anxiety, increase absorption of calcium, improves digestion & prevent leaky gut, helpful in pancreatitis.

- **Methionine:** -

It is a sulfur containing amino acid; it is essential; it plays a critical role in the metabolism & health; it acts on normal cell functioning, growth & repair. It is also a chelating agent for heavy metals; due to its sulfur content it is helpful in hair, nail health & growth & good for skin health; it reduces cholesterol by increasing the production of lecithin in liver & reduces fat formation in liver, also protects kidneys, liver from hepatotoxins, it is an antioxidant. It is absorbed in lumen of small intestines into enterocytes by active transport & metabolized in liver.

**Main sources of methionine:** -

Meat, mutton, fish, chicken, cheese, egg, beans, milk, nuts, shellfish etc.

- **Cystine:** -

It is the oxidized dimer form of amino acid, it is nonessential; the body uses it to produce taurine & other amino acids; it is a sulfur containing amino acid; our body uses vitamin B6 with the help of cystine; it heals burns, wounds, bronchitis, assist in supply of insulin, it increases level of glutathione in liver, lungs, kidneys & bone marrow. It is anti aging, anti inflammatory, anti arthritis, anti rheumatoid arthritis.

**Main sources of cystine:** -

Meat, egg, milk, garlic, onion, broccoli, oats, wheat germ, lentils etc.

- **Phenylalanine:** -

It is an aromatic essential amino acid in human; it plays a key role in biosynthesis of other amino acids; it is important in the structure & function of many proteins & enzymes. It is precursor of melanin, dopamine, noradrenalin hormone, thyroxin hormone. It is converted into tyrosine & used in biosynthesis of dopamine & noradrenalin. It improves memory, reduces pain of hunger; it is anti depressant; it is also a building block protein; it is useful in vitiligo, depression, ADHA, parkinson's, multiple sclerosis, pain, osteoarthritis, rheumatoid arthritis, fat burn & helpful in alcohol withdrawal symptoms.

**Main sources of phenylalanine:** -

Pumpkin seed, nuts, seeds, soy, meat, fish, chicken, egg, beans, milk etc.

- **Tyrosine:** -

It is a nonessential amino acid; it is also called as 4-hydroxyphenylalanine; it is useful in cell synthesis of protein; it is a building block protein; body prepares it from phenylalanine. It is a precursor & used to produce noradrenalin, dopamine, & thyroxin & melanin hormones. It reduces stress, improves memory, it promotes growth, mental health, skin health, fat burn. It acts as a mood elevator, anti depressant, improves memory, mental alertness, its deficiency can cause hypothyroidism leading to low blood pressure, low body temperature (hypothermia), stress, fatigue, narcolepsy; it helps thyroid gland, adrenal gland, pituitary gland to function properly. It is absorbed in small intestine by sodium-dependant active transport; after absorption it reaches the blood & crosses the blood brain barrier (BBB) & enters the brain cells & gets metabolized into catecholamine (noradrenalin). Human body regulates its amount by eating it by food sources & making inside the body (nonessential). The body does not store it much for later uses.

**Main sources of tyrosine:** -

Meat, fish, egg, milk, nuts, beans, oats, wheat, black seeds etc.

**Dopamine:** -

It regulates reward & pleasure centers in brain; it is a chemical important for memory, motor skills & etc.

**Nor-adrenaline & adrenaline:** -

These hormones are responsible for fight & flight response in stressful situations & also controls many functions of the body; it is secreted by adrenal glands.

**Thyroxin:** -

It is secreted by thyroid gland; it regulates metabolism, blood pressure, digestion, energy etc.

### **Melanin: -**

It is pigmented hormone, gives our skin, hair, eye their colour; dark skinned people have more melanin in their skin than light skin people (depend on exposure to sunlight).

- **Valine: -**

It is an essential nutrient for vertebrates, biosynthesis of protein; it is an aliphatic & extremely hydrophobic essential amino acid; it is branched chain of amino acid (BCAA); it is important for growth, repair, blood glucose regulation, for energy; it stimulates CNS, proper mental function.

### **Main sources of valine: -**

Cheese, soy, beans, nuts, fish, meat, chicken, mushroom, seeds, nuts, whole grains etc.

- **Histidine: -**

It is an amino acid used in biosynthesis of protein; it is semi essential amino acid, needed by human for production of histamine & also for growth & tissue repair, it is helpful in maintaining myelin sheaths that covers the nerves & protects the nerves.

### **Main sources of histidine: -**

Meat, mutton, fish, milk, egg, seeds, nuts, chicken, cheese, soy, beans, whole grains, fenugreek seeds.

### **Basic pharmacokinetics of histidine (based on human intake in natural food products): -**

It is absorbed in small intestine via active transport requiring the presence of sodium.

### **Basic clinical pharmacology of histidine: -**

It plays many roles in immunity, gastric secretion & sexual functions. It is also required for blood cell formation & protects tissues against damage of radiation & heavy metals. It keeps normal pH of 7 in the body, useful in rheumatoid arthritis, allergy, ulcer & anemia caused by kidney failure or dialysis. It is an antioxidant, anti inflammatory, reduces cholesterol.

- **Arginine: -**

It is among conditional essential amino acid the body needs to function properly; it is made in liver; it plays an important role in building protein thus helpful in body building.

### **Main sources of arginine: -**

Chicken, pumpkin seeds, spirulina, dairy products, red meat, fish, egg etc.

### **Basic pharmacokinetics of arginine (based on human intake in natural food products): -**

It is absorbed in jejunum mainly from oral diet.

### **Basic clinical pharmacology of arginine: -**

It releases nitric oxide in the blood & nitric oxide dilates the blood vessels thus increases the blood supply & controls high blood pressure, it improves erection, builds muscles etc. it also act on release of growth hormone, insulin & other substances in the body. It also improves heart health, athletes performance, stimulates immune system; citrulline present in watermelon is converted into arginine in kidneys, please refer lesson on watermelon.

- **Alanine: -**

It is a non essential amino acids that is present in blood plasma in its free state in high levels; it is involved in sugar & acid metabolism, protein synthesis, it increases immunity, provides energy for muscles tissues, brain & CNS, it act on tryptophan, vitamin B6 metabolism; it is an important sources of energy for muscles; it helps the body to convert simple sugar (glucose) into energy; it is produced in the body. It increases exercise capacity; reduces muscle fatigue, boost immunity, it is antioxidant; anti aging; increases muscle growth; ideal pre & post workout, reduce blood sugar, prevent liver disease, helps the liver to eliminate toxins, improves CNS functioning, helpful in benign prostate hypertrophy. It is digested in small intestine; it is converted into pyruvic acid by alanine aminotransferase-1; during fasting condition alanine derived from protein breakdown is converted into pyruvate & used to synthesis

glucose by gluconeogenesis in liver, it is excreted in urine via urea cycle. It is stored little in skeletal muscles.

#### **Main sources of alanine: -**

Meat, fish, egg, milk, aleovera, honey, black seeds, nuts etc.

- **Aspartic acid: -**

It is a non essential amino acid; it is over all negatively charged & plays an important role in synthesis of other amino acid, citric acid & urea cycles; it is found in animals, plants, sugarcane, sugarbeet. It may be a neurotransmitter; it strengthens the muscles, improves heart function, helps in maintaining mental health, reduces tiredness, improves athletic performance, increases muscle size, reduces depression & fatigue. It is absorbed in small intestine by active transport.

#### **Main sources of aspartic acid: -**

Meat, oysters, seeds, oats, avocado, sugar beet, milk, egg, nuts, cereals etc.

- **Glutamic acid: -**

It is a nonessential amino acid. It is an excitatory neuro-transmitter; it is necessary for biosynthesis of proteins; body uses it for several key functions within the body like making other neuro-transmitters such as GABA; it promotes brain health, muscles health, intelligence, mood & mental alertness. It is called as chemical messenger. It plays an important role in body's disposal of excessive waste like nitrogen. It is absorbed in lumen of small intestine into enterocytes by active transport & excreted in urine mainly. It is almost about 2 kgs, storage in natural form in brain, kidneys, liver, muscles etc.

#### **Main sources of glutamic acid: -**

Meat, chicken, fish, egg, milk, wheat, mushroom, soy, broccoli, walnut, peas etc.

- **Glycine: -**

It is a nonessential amino acid that body needs for growth & maintainance of tissue & need to prepare hormones & enzymes. It is inhibitory neurotransmitter. It helps in preparing glutathione (a powerful antioxidant & reduces free radicals, delay aging). It is helpful in preparing of creatine (provides energy to muscles to perform exercise etc & acts on muscle contraction), beneficial for brain health, bone health, alzheimer's, schizophrenia, sleep disorder, stroke, burns, protects kidney & liver from harmful side effects of drugs used after organ transplant, heals wound & ulcers, it is anti inflammatory, improves skin health.

#### **Main sources of glycine: -**

Meat, fish, milk, legumes etc.

- **Proline: -**

It is a protein-genic amino acid used in biosynthesis of proteins. It heals cartilages, cushion joints, tendons, ligament, heart muscles, connective tissues & helps in formation of collagen.

#### **Main sources of proline: -**

Soy, pumpkin seed, lentils, black beans, quinoa etc.

- **Serine:-**

It is a nonessential amino acid, important for synthesis of protein, fats metabolism, muscle growth, immune system; it is a precursor of many amino acids, helpful in enzyme catalyze its reaction, overall health, physical & mental health.

#### **Main sources of serine: -**

Soybean, egg, lentils, meat, fish, nuts, almonds, walnut etc.

- **Storage: -**

Whole bulbs and cloves still in their paper skins can be stored at room temperature in a dry place. Cloves that have been peeled and detached from the root should be stored in a container in the refrigerator to prevent the bulbs from sprouting.

# GARLIC. NUTRITIONAL VALUE



per 100 g

FAT	0.15 g	CARBOHYDRATES	
PROTEIN	6.36 g	sugars	1.0 g
		dietary fibre	2.1 g
MINERALS		VITAMINS	
potassium	401 mg	vitamin B1	0.2 mg
sodium	17 mg	vitamin B2	0.11 mg
calcium	181 mg	vitamin B3	0.7 mg
phosphorus	153 mg	vitamin B5	0.596 mg
magnesium	25 mg	vitamin B6	1.235 mg
iron	1.7 mg	vitamin B9	3 µg
zinc	1.16 mg	vitamin C	31.2 mg
manganese	1.672 mg		
ENERGY	149 kcal	OTHER	
		selenium	14.2 µg

- References & research:** -

- CABI Crop Protection Compendium. (2010). *Allium sativum* datasheet. Available at: <http://www.cabi.org/cpc/datasheet/4250>. [Accessed 08 December 14]. Paid subscription required.
- Meyers, M. (2006). Garlic. An Herb Society of America Guide.
- The Herb Society of America. Available at: <http://www.herbsociety.org/factsheets/Garlic%20Guide.pdf>. [Accessed 08 December 14].
- Free to access.
- Schwartz, H. F. & Mohan, S. K. (Eds.) (2008) Compendium of Onion and Garlic Diseases and Pests. Second Edition.
- American Phytopathological Society Press. Available at: <http://www.apsnet.org/apsstore/shopapspress/Pages/43573.aspx>. Available for purchase from APS Press.
- Sideman, B. (2011). Growing Garlic.
- University of New Hampshire Cooperative Extension. Available at: [https://extension.unh.edu/resources/files/Resource001875\\_Rep2720.pdf](https://extension.unh.edu/resources/files/Resource001875_Rep2720.pdf). [Accessed 08 December 14]. Free to access.
1. Singh TU, Kumar D, Tandan SK, Mishra SK. Inhibitory effect of essential oils of Allium sativum and Piper longum on spontaneous muscular activity of liver fluke, *Fasciola gigantica*. *Exp Parasitol.* 2009;123:302–308. [\[PubMed\]](#) [\[Google Scholar\]](#)
  2. Eja ME, Asikong BE, Abriba C, Arikpo GE, Anwan EE, Enyi-Idoh KH. A comparative assessment of the antimicrobial effects of Garlic (*Allium sativum*) and Antibiotics on diarrheagenic organisms. *Southeast Asian J Trop Med Public Health.* 2007;38:2. [\[PubMed\]](#) [\[Google Scholar\]](#)
  3. PDR for Herbal Medicines. Medical Economics Company, Inc: Montvale; 2000. [\[Google Scholar\]](#)
  4. Mikaili P, Mehdioghli R. Garlic Pharmacology. National Library and Archives Organisation of Iran; 2010. ISBN: 9789647780704. (In Persian) [\[Google Scholar\]](#)
  5. El-mahmood MA. Efficacy of crude extracts of garlic (*Allium sativum* Linn) against nosocomial *Escherichia coli*, *Staphylococcus aureus*, *Streptococcus pneumoniae* and *Pseudomonas aeruginosa*. *J Med Plants Res.* 2009;3:179–185. [\[Google Scholar\]](#)
  6. McRae MP. A review of studies of garlic (*Allium sativum*) on serum lipids and blood pressure before and after 1994: does the amount of allicin released from garlic powder tablets play a role. *J Chiropr Med.* 2005;4:82–90. [\[PMC free article\]](#) [\[PubMed\]](#) [\[Google Scholar\]](#)
  7. Tariq HA, Kandil O, Elkadi A, Carter J. Garlic revisited: therapeutic for the major diseases of our times. *J Natl Med Assoc.* 1988;80:439–445. [\[PMC free article\]](#) [\[PubMed\]](#) [\[Google Scholar\]](#)
  8. Lanzotti V, Barile E, Antignani V, Bonanomi G, Scala F. Antifungal saponins from bulbs of garlic, *Allium sativum* L. var. Voghiera. *Phytochemistry.* 2012;78:126–34. [\[PubMed\]](#) [\[Google Scholar\]](#)
  9. Azimi H, Fallah-Tafti M, Karimi-Darmiyan M, Abdollahi M. A comprehensive review of vaginitis phytotherapy. *Pak J Biol Sci.* 2011;14:960–966. [\[PubMed\]](#) [\[Google Scholar\]](#)
  10. Ankri S, Mirelman D. Antimicrobial properties of allicin from garlic. *Microbes Infect.* 1999;2:125–129. [\[PubMed\]](#) [\[Google Scholar\]](#)
  11. Meriga B, Mopuri R, MuraliKrishna T. Insecticidal, antimicrobial and antioxidant activities of bulb extracts of *Allium sativum*. *Asian Pac J Trop Med.* 2012;5:391–395. [\[PubMed\]](#) [\[Google Scholar\]](#)
  12. Pundir RK, Jain P, Sharma CH. Antimicrobial activity of ethanolic extracts of *syzygium aromaticum* and *Allium sativum* against food associated bacteria and fungi. *Ethnobotanical Leaflets.* 2010;14:344–360. [\[Google Scholar\]](#)
  13. Liu S, Sun Y, Li W, Yu H, Li X, Liu Z, et al. The antibacterial mode of action of allitridi for its potential use as a therapeutic agent against *Helicobacter pylori* infection. *FEMS Microbiol Lett.* 2010;303:183–189. [\[PubMed\]](#) [\[Google Scholar\]](#)
  14. Benkebla N. Antimicrobial activity of essential oil extracts of various onions (*Allium cepa*) and garlic (*Allium sativum*). *Lebensm.-Wiss. u.-Technol.* 2004;37:263–268. [\[Google Scholar\]](#)
  15. Palaksha MN, Ahmed M, Das S. Antibacterial activity of garlic extract on streptomycin-resistant *Staphylococcus aureus* and *Escherichia coli* solely and in synergism with streptomycin. *J Nat Sci Biol Med.* 2010;1:12–5. [\[PMC free article\]](#) [\[PubMed\]](#) [\[Google Scholar\]](#)
  16. Lai PK, Roy J. Antimicrobial and chemopreventive properties of herbs and spices. *Curr Med Chem.* 2004;11:1451–1460. [\[PubMed\]](#) [\[Google Scholar\]](#)

17. Becker PM, van Wickselaar PG, Mul MF, Pol A, Engel B, Wijdenes JW, et al. *Actinobacillus pleuropneumoniae* is impaired by the garlic volatile allyl methyl sulfide (AMS) in vitro and in-feed garlic alleviates pleuropneumonia in a pig model. *Vet Microbiol.* 2012;154:316–324. [PubMed] [Google Scholar]
18. Loesche WJ. Role of *Streptococcus mutans* in human dental decay. *Microbial Rev.* 1986;50:323–580. [PMC free article] [PubMed] [Google Scholar]
19. Chavan SD, Shetty NL, Kanuri M. Comparative evaluation of garlic extract mouthwash and chlorhexidine mouthwash on salivary *Streptococcus mutans* count - an in vitro study. *Oral Health Prev Dent.* 2010;8:369–374. [PubMed] [Google Scholar]
20. Appel E, Vallon-Eberhard A, Rabinkov A, Brenner O, Shin I, Sasson K, et al. Therapy of murine pulmonary aspergillosis with antibody-alliinase conjugates and alliin. *Antimicrob Agents Chemother.* 2010;54:898–906. [PMC free article] [PubMed] [Google Scholar]
21. Khodavandi A, Alizadeh F, Aala F, Sekawi Z, Chong PP. In vitro investigation of antifungal activity of allicin alone and in combination with azoles against *Candida* species. *Mycopathologia.* 2010;169:287–295. [PubMed] [Google Scholar]
22. An M, Shen H, Cao Y, Zhang J, Cai Y, Wang R, et al. Allicin enhances the oxidative. *Int J Antimicrob Agents.* 2009;33:258–263. [PubMed] [Google Scholar]
23. Ogita A, Fujita K, Taniguchi M, Tanaka T. Enhancement of the fungicidal activity of amphotericin B by allicin, an allyl-sulfur compound from garlic, against the yeast *Saccharomyces cerevisiae* as a model system. *Planta Med.* 2006;72:1247–1250. [PubMed] [Google Scholar]
24. Ogita A, Nagao Y, Fujita K, Tanaka T. Amplification of vacuole-targeting fungicidal activity of antibacterial antibiotic polymyxin B by allicin, an allyl sulfur compound from garlic. *J Antibiot.* 2007;60:511–518. [PubMed] [Google Scholar]
25. Yousuf S, Ahmad A, Khan A, Manzoor N, Khan LA. Effect of diallyldisulphide on an antioxidant enzyme system in *Candida* species. *Can J Microbiol.* 2010;56:816–821. [PubMed] [Google Scholar]
26. Avato P, Tursil E, Vitali C, Miccolis V, Candido V. Allylsulfide constituents of garlic volatile oil as antimicrobial agents. *Phytomedicine.* 2000;7:239–243. [PubMed] [Google Scholar]
27. Kloucek P, Smid J, Flesar J, Havlik J, Titera D, Rada V, et al. In vitro inhibitory activity of essential oil vapors against *Ascospaera apis*. *Nat Prod Commun.* 2012;7:253–256. [PubMed] [Google Scholar]
28. Londhe VP, Gavasane AT, Nipate SS, Bandawane DD, Chaudhari PD. Role of garlic (*Allium sativum*) in various diseases: An overview. *J Pharm Res Opin.* 2011;1:129–134. [Google Scholar]
29. Ledezma E, Apitz-Castro R. Ajoene the main active compound of garlic (*Allium sativum*): a new antifungal agent. *Rev Iberoam Micol.* 2006;23:75–80. [PubMed] [Google Scholar]
30. Thomaz L, Apitz-Castro R, Marques AF, Travassos LR, Taborda CP. Experimental paracoccidioidomycosis: alternative therapy with ajoene, compound from *Allium sativum*, associated with sulfamethoxazole/trimethoprim. *Med Mycol.* 2008;46:113–118. [PubMed] [Google Scholar]
31. Yoshida S, Kasuga Sh, Hayashi N, Ushiroguchi T, Matsuura H, Nakagawa Sh. Antifungal activity of ajoene derived from garlic. *Appl Environ Microbiol.* 1987;53:615–617. [PMC free article] [PubMed] [Google Scholar]
32. Shamim S, Ahmed SW, Azhar I. Antifungal activity of *Allium*, *Aloe*, and *Solanum* species. *Pharm Biol.* 2004;42:491–498. [Google Scholar]
33. Adetumbi M, Javor GT, Lau BHS. *Allium sativum* (Garlic) inhibits lipid synthesis by *candida albicans*. *Anti'microb Agents Chemother.* 1986;30:499–501. [PMC free article] [PubMed] [Google Scholar]
34. Khan ZK, Katiyar R. Potent antifungal activity of garlic (*allium sativum*) against experimental murine disseminated cryptococcosis. *Pharm Biol.* 2000;38:87–100. [PubMed] [Google Scholar]
35. Davis LE, Shen JK, Cai Y. Antifungal activity in human cerebrospinal fluid and plasma after intravenous administration of *Allium sativum*. *Antimicrob Agents Chemother.* 1990;34:651–653. [PMC free article] [PubMed] [Google Scholar]
36. Wang HX, Ng TB. Purification of allixin, a novel antifungal protein from bulbs of the round-cloved garlic. *Life Sci.* 2001;70:357–365. [PubMed] [Google Scholar]
37. Lima CM, Freitas FI, Morais LC, Cavalcanti MG, Silva LF, Padilha RJ, et al. Ultrastructural study on the morphological changes to male worms of *Schistosoma mansoni* after in vitro exposure to allicin. *Rev Soc Bras Med Trop.* 2011;44:327–330. [PubMed] [Google Scholar]
38. Waag T, Gelhaus C, Rath J, Stich A, Leippe M, Schirmeister T. Allicin and derivates are cysteine protease inhibitors with antiparasitic activity. *Bioorg Med Chem Lett.* 2010;20:5541–5543. [PubMed] [Google Scholar]
39. Lun ZR, Burri C, Menzinger M, Kaminsky R. Antiparasitic activity of diallyl trisulfide (Dasuansu) on human and animal pathogenic protozoa (*Trypanosoma* sp *Entamoeba histolytica* and *Giardia lamblia*) in vitro. *Ann Soc Belg Med Trop.* 1994;74:51–59. [PubMed] [Google Scholar]
40. Gallwitz H, Bonse S, Martinez-Cruz A, Schlichting I, Schumacher K, Krauth-Siegel RL. Ajoene is an inhibitor and subversive substrate of human glutathione reductase and *Trypanosoma cruzi* trypanothione reductase: crystallographic, kinetic, and spectroscopic studies. *J Med Chem.* 1999;42:364–72. [PubMed] [Google Scholar]
41. Bany J, Zdanowska D, Zdanowski R, Skopińska-Rózewska E. The effect of herbal remedy on the development of *Trichinella spiralis* infection in mice. *Pol J Vet Sci.* 2003;6:6–8. [PubMed] [Google Scholar]
42. Anthony JP, Fyfe L, Smith H. Plant active components - a resource for antiparasitic agents. *Trends Parasitol.* 2005;21:462–468. [PubMed] [Google Scholar]
43. Soffar SA, Mokhtar GM. Evaluation of the antiparasitic effect of aqueous garlic (*Allium sativum*) extract in *hymenolepiasis nana* and *giardiasis*. *J Egypt Soc Parasitol.* 1991;21:497–502. [PubMed] [Google Scholar]
44. Ahmed M, Laing MD, Nsahlai IV. In vitro anthelmintic activity of crude extracts of selected medicinal plants against *Haemonchus contortus* from sheep. *J Helminthol.* 2012;26:1–6. [PubMed] [Google Scholar]
45. Klimpel S, Abdel-Ghaffar F, Al-Rasheid KA, Aksu G, Fischer K, Strassen B, et al. The effects of different plant extracts on nematodes. *Parasitol Res.* 2011;108:1047–1054. [PubMed] [Google Scholar]
46. Abdel-Ghaffar F, Semmler M, Al-Rasheid KA, Strassen B, Fischer K, Aksu G, et al. The effects of different plant extracts on intestinal cestodes and on trematodes. *Parasitol Res.* 2011;108:979–984. [PubMed] [Google Scholar]
47. Kalu IG, Ofoegbu U, Eroegbusi J, Nwachukwu CU, Ibeh B. Larvicidal activities of ethanol extract of *Allium sativum* (garlic bulb) against the filarial vector, *Culex quinquefasciatus*. *J Med Plants Res.* 2010;4:496–498. [Google Scholar]
48. Singha S, Chandra G. Mosquito larvicidal activity of some common spices and vegetable waste on *Culex quinquefasciatus* and *Anopheles stephensi*. *Asian Pac J Trop Med.* 2011;4:288–293. [PubMed] [Google Scholar]
49. Martinez-Velazquez M, Rosario-Cruz R, Castillo-Herrera G, Flores-Fernandez JM, Alvarez AH, Lugo-Cervantes E. Acaricidal effect of essential oils from *Lippia graveolens* (Lamiaceae: Verbenaceae), *Rosmarinus officinalis* (Lamiaceae: Lamiaceae), and *Allium sativum* (Liliaceae: Liliaceae) against *Rhipicephalus (Boophilus) microplus* (Acar: Ixodidae). *J Med Entomol.* 2011;48:822–827. [PubMed] [Google Scholar]
50. Tedeschi P, Leis M, Pezzi M, Civolani S, Maietti A, Brandolini V. Insecticidal activity and fungitoxicity of plant extracts and components of horseradish (*Armoracia rusticana*) and garlic (*Allium sativum*). *J Environ Sci Health.* 2011;46:486–490. [PubMed] [Google Scholar]
51. Park IK, Choi KS, Kim DH, Choi IH, Kim LS, Bak WC, et al. Fumigant activity of plant essential oils and components from horseradish (*Armoracia rusticana*), anise (*Pimpinella anisum*) and garlic (*Allium sativum*) oils against *Lycoriella ingenua* (Diptera: Sciaridae). *Pest Manag Sci.* 2006;62:723–728. [PubMed] [Google Scholar]
52. Weber ND, Andersen DO, North JA, Murray BK, Lawson LD, Hughes BG. In vitro virucidal effects of *Allium sativum* (garlic) extract and compounds. *Planta Med.* 1992;58:417–423. [PubMed] [Google Scholar]

53. Josling P. Preventing the common cold with a garlic supplement: a double-blind placebo-controlled survey. *Adv Ther.* 2001;18:189–193. [PubMed] [Google Scholar]
54. Tatarintsev AV, Vrzhetz PV, Ershov DE, Shchegolev AA, Turgiev AS, Karamov EV, et al. The ajoene blockade of integrin-dependent processes in an HIV-infected cell system. *Vestn Ross Akad Med Nauk.* 1992;6–10. [PubMed] [Google Scholar]
55. Zhen H, Fang F, Ye DY, Shu SN, Zhou YF, Dong YS, et al. Experimental study on the action of allitridin against human cytomegalovirus in vitro: Inhibitory effects on immediate-early genes. *Antiviral Res.* 2006;72:68–74. [PubMed] [Google Scholar]
56. Qidwai W, Qureshi R, Hasan SN, Azam SI. Effect of dietary garlic (*Allium Sativum*) on the blood pressure in humans—a pilot study. *J Pak Med Assoc.* 2000;50:204–207. [PubMed] [Google Scholar]
57. Rahman K, Lowe GM. Garlic and cardiovascular disease: a critical review. *J Nutr.* 2006;136:736S–740S. [PubMed] [Google Scholar]
58. Kianoush S, Balali-Mood M, Mousavi SR, Moradi V, Sadeghi M, Dadpour B, et al. Comparison of therapeutic effects of garlic and d-Penicillamine in patients with chronic occupational lead poisoning. *Basic Clin Pharmacol Toxicol.* 2012;110:476–481. [PubMed] [Google Scholar]
59. Nwokocha CR, Ozolua RI, Owu DU, Nwokocha MI, Ugwu AC. Antihypertensive properties of *Allium sativum* (garlic) on normotensive and two kidney one clip hypertensive rats. *Niger J Physiol Sci.* 2011;26:213–218. [PubMed] [Google Scholar]
60. Vazquez-Prieto MA, González RE, Renna NF, Galmarini CR, Miatello RM. Aqueous garlic extracts prevent oxidative stress and vascular remodeling in an experimental model of metabolic syndrome. *J Agric Food Chem.* 2010;58:6630–6635. [PubMed] [Google Scholar]
61. Duda G, Suliburska J, Pupek-Musialik D. Effects of short-term garlic supplementation on lipid metabolism and antioxidant status in hypertensive adults. *Pharmacol Rep.* 2008;60:163–170. [PubMed] [Google Scholar]
62. Sener G, Sakarcan A, Yegen BC. Role of garlic in the prevention of ischemia-reperfusion injury. *Mol Nutr Food Res.* 2007;51:1345–1352. [PubMed] [Google Scholar]
63. Al-Qattan KK, Thomson M, Al-Mutawa'a S, Al-Hajeri D, Drobiova H, Ali M. Nitric oxide mediates the blood-pressure lowering effect of garlic in the rat two-kidney, one-clip model of hypertension. *J Nutr.* 2006;136:774S–776S. [PubMed] [Google Scholar]
64. Harauma A, Moriguchi T. Aged garlic extract improves blood pressure in spontaneously hypertensive rats more safely than raw garlic. *J Nutr.* 2006;136:769S–773S. [PubMed] [Google Scholar]
65. Zahid Ashraf M, Hussain ME, Fahim M. Antiatherosclerotic effects of dietary supplementations of garlic and turmeric. Restoration of endothelial function in rats. *Life Sci.* 2005;77:837–857. [PubMed] [Google Scholar]
66. Budoff MJ, Takasu J, Flores FR, Niijima Y, Lu B, Lau BH, et al. Inhibiting progression of coronary calcification using Aged Garlic Extract in patients receiving statin therapy: a preliminary study. *Prev Med.* 2004;39:985–991. [PubMed] [Google Scholar]
67. Verma SK, Rajeevan V, Jain P, Bordia A. Effect of garlic (*Allium sativum*) oil on exercise tolerance in patients with coronary artery disease. *J Physiol Pharmacol.* 2005;49:115–118. [PubMed] [Google Scholar]
68. Yang Y, Chan SW, Hu M, Walden R, Tomlinson B. Effects of some common food constituents on cardiovascular disease. *ISRN Cardiol.* 2011;397136. [PMC free article] [PubMed] [Google Scholar]
69. Ali M, Al-Qattan KK, Al-Enezi F, Khanafer RM, Mustafa T. Effect of allicin from garlic powder on serum lipids and blood pressure in rats fed with a high cholesterol diet. *Prostaglandins Leukot Essent Fatty Acids.* 2000;62:253–259. [PubMed] [Google Scholar]
70. Chu TC, Ogidigben M, Han JC, Potter DE. Allicin-induced hypotension in rabbit eyes. *J Ocul Pharmacol.* 1993;9:201–209. [PubMed] [Google Scholar]
71. Drobiova H, Thomson M, Al-Qattan K, Peltonen-Shalaby R, Al-Amin Z, Ali M. Garlic increases antioxidant levels in diabetic and hypertensive rats determined by a modified peroxidase method. *Evid Based Complement Alternat Med.* 2011;703049. [PMC free article] [PubMed] [Google Scholar]
72. Fallon MB, Abrams GA, Abdel-Razek TT, Dai J, Chen SJ, Chen YF, et al. Garlic prevents hypoxic pulmonary hypertension in rats. *Am J Physiol.* 1998;275:L283–287. [PubMed] [Google Scholar]
73. Brankovic S, Radenovic M, Kitic D, Veljkovic S, Ivetic V, Pavlovic D, et al. Comparison of the hypotensive and bradycardic activity of ginkgo, garlic, and onion extracts. *Clin Exp Hypertens.* 2011;33:95–99. [PubMed] [Google Scholar]
74. Gu X, Zhu YZ. Therapeutic applications of organosulfur compounds as novel hydrogen sulfide. *Expert Rev Clin Pharmacol.* 2011;4:123–133. [PubMed] [Google Scholar]
75. Lava M, Bhushan S, Lefer DJ. Hydrogen sulfide-mediated cardioprotection: mechanisms and therapeutic potential. *Clin Sci.* 2011;120:219–229. [PubMed] [Google Scholar]
76. Ginter E, Simko V. Garlic (*Allium sativum* L) and cardiovascular diseases. *Bratisl Lek Listy.* 2010;111:452–456. [PubMed] [Google Scholar]
77. Cruz C, Correa-Rotter R, Sánchez-González DJ, Hernández-Pando R, Maldonado PD, Martínez-Martínez CM, et al. Renoprotective and antihypertensive effects of S-allylcysteine in 5/6 nephrectomized rats. *Am J Physiol Renal Physiol.* 2007;293:F1691–1698. [PubMed] [Google Scholar]
78. Sobenin IA, Andrianova IV, Fomchenkov IV, Gorchakova TV, Orekhov AN. Time-released garlic powder tablets lower systolic and diastolic blood pressure in men with mild and moderate arterial hypertension. *Hypertens Res.* 2009;32:433–437. [PubMed] [Google Scholar]
79. Durak I, Kavutcu M, Aytaç B, Avcı A, Devrim E, Ozbek H, Oztürk HS. Effects of garlic extract consumption on blood lipid and oxidant/antioxidant parameters in humans with high blood cholesterol. *J Nutr Biochem.* 2004;15:373–377. [PubMed] [Google Scholar]
80. Castro C, Lorenzo AG, González A, Cruzado M. Garlic components inhibit angiotensin II-induced cell-cycle progression and migration: Involvement of cell-cycle inhibitor p27 (Kip1) and mitogen-activated protein kinase. *Mol Nutr Food Res.* 2010;54:781–787. [PubMed] [Google Scholar]
81. Thevenot T, Pastor CM, Cervoni JP, Jacquelinet C, Nguyen-Khac E, Richou C, et al. Hepatopulmonary syndrome. *Gastroenterol Clin Biol.* 2009;33:565–579. [PubMed] [Google Scholar]
82. Asdaq SM, Inamdar MN. Pharmacodynamic and Pharmacokinetic Interactions of Propranolol with Garlic (*Allium sativum*) in Rats. *Evid Based Complement Alternat Med.* 2011;824042. [PMC free article] [PubMed] [Google Scholar]
83. Asdaq SM, Inamdar MN. The potential benefits of a garlic and hydrochlorothiazide combination as antihypertensive and cardioprotective in rats. *J Nat Med.* 2011;65:81–88. [PubMed] [Google Scholar]
84. Asdaq SM, Inamdar MN. The potential for interaction of hydrochlorothiazide with garlic in rats. *Chem Biol Interact.* 2009;181:472–479. [PubMed] [Google Scholar]
85. Asdaq SM, Inamdar MN. Potential of garlic and its active constituent, S-allyl cysteine, as antihypertensive and cardioprotective in presence of captopril. *Phytomedicine.* 2010;17:1016–1026. [PubMed] [Google Scholar]
86. Younis F, Mirelman D, Rabinkov A, Rosenthal T. S-allyl-mercapto-captopril: a novel compound in the treatment of Cohen-Rosenthal diabetic hypertensive rats. *J Clin Hypertens (Greenwich).* 2010;12:451–455. [PubMed] [Google Scholar]
87. Elkayam A, Mirelman D, Peleg E, Wilchek M, Miron T, Rabinkov A, et al. The effects of allicin and enalapril in fructose-induced hyperinsulinemic hyperlipidemic hypertensive rats. *Am J Hypertens.* 2001;14:377–381. [PubMed] [Google Scholar]

• ***Research:*** -

In Prophet ﷺ time mostly people were poor, in Arab much vegetables did not grow, vegetables from other parts of the world were not every time available, people use to eat raw garlic very often & we all know that

it has a very offensive smell in breath which irritates other people, & Prophet ﷺ strictly prohibited to eat raw garlic, but allowed to eat it in cooked food, & prohibited to come in Masjid or near it with its smell in breath, because in Masjid there are angles, who also get irritated with its smell, And by this rule all bad smell things should be avoided in Masjid or near it. The people often use to come in Masjid with its smell in breath, & may be people of that time ate raw garlic in much quantity to fulfill their hunger, & it is seen that the bad smell is very offensive if raw garlic is eaten in much quantity & remains for very long in the breath & also its smell is found in sweating which is again bad. And also cause excessive unwanted gas formation & its expulsion & if this occurs in public it is thing of irritating for others.

2. Today no body eats garlic raw full stomach because today we have all types of vegetables available all season thus garlic remains an ingredient of food. Thought its medicinal properties are not neglected.

The importance of diallyl disulfide and diallyl trisulfide in the flavor of garlic distillates was established. Allicin (diallyl-thiosulfinate), the most biologically active compound of garlic was discovered in 1944, and it is noted for its potent antimicrobial activity. Traditionally, many cultures used garlic for its different biological and medicinal effects. Based on this belief, trials of whole and garlic extracts started and continued in human and animal models. Recently attempts were being made to identify the functional components of garlic and to explore their mechanisms of action in human and animal models. In addition, other derived compounds from active garlic components are being developed to be used, which could provide more safety and effectiveness. The dose levels of effective functions and long-term toxicological safety need to be explored in more detail.

- **Conclusion of research:** -

Garlic eaten raw is less beneficial & it should be cut or crush or cooked in food & eat to get the benefits of allicin sulfur form after cutting or crushing of the garlic & maximum benefits of garlic are because of allicin.

It is best to cut in extra virgin olive & soak & crush in the same & eaten or cooked; it has lot of properties which are antioxidant, anti-inflammatory, antiviral, antifungal, anti bacterial, prevent heart diseases, brain diseases, good for hair growth, dandruff, hair fall, osteoarthritis, allergy, cold cough, lungs diseases, typhoid, infections, boost immune system etc.